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EDITORIAL

As has been emphasized in our earlier numbers it is one of the primary aims of this *Journal* to encourage and, when opportunity serves, to promote researches into the nature and treatment of delinquency. Apart from the publication of research papers and the provision of a calendar of researches, this can best be achieved by giving systematic attention to the three main aspects of research, namely, selection of subjects, development of scientific techniques and choice of personnel.

Regarding the selection of subjects it can be taken as axiomatic that, although there is ample room for investigation in every branch of delinquency work, the most rapid progress and the greatest economy of effort can be secured by concentrating attention in the first instance on key problems. In the field of delinquent psychology, for example, progress is constantly hampered by lack of precise information on such subjects as the mental structure of the psychopath, the developmental relation between moral sense and reality sense, the individual function or value of criminal behaviour or the nature of therapeutic processes in delinquency. Every department of criminological investigation can produce its quota of riddles, the essential point of which lies not so much in the peculiarity of the subject matter as in the absence of a suitable etiological formulation of it. So far as selection of subject is concerned, effective research depends to a considerable extent not only in knowing where to look for what one hopes to find, but in treating gaps in information as sources of actual rather than merely potential knowledge. Precisely delimited ignorance, in other words, is an obversive or rather a negative form of knowledge. Allowing a generous margin for subjective error, the accurately posed question contains its own answer.

Concerning methodology there is, it would seem, a general consensus of opinion between psychologists and sociologists. Stung no doubt by the

persistent criticisms of the natural scientist who tends to view their methods of investigation with some suspicion, the general psychologist and sociologist take a special pride in following those standard scientific disciplines which are intended to eliminate subjective error and bias. This is all to the good. But to confine research within these rigid boundaries is to court stalemate. The most austere statistical control, for example, cannot redress the debit balance of a badly chosen subject, superficial examination or a prejudiced approach. It is as true of research as of other activities of life that one cannot make a silk purse out of a sow's ear.

In any case, too exclusive insistence on the discipline of the 'control group' has the disadvantage of ruling out one of the potentially most valuable instruments of investigation, viz. the exercise of trained imagination, or more precisely, the interpretation by individual investigators of isolated data. Anathema to the natural scientist as interpretative methods of investigation may be, they are nevertheless essential to the progress of any dynamic psychology which concerns itself with unconscious factors. In a comparatively fallow field such as the psychology of delinquency it seems likely that for some time to come increase in understanding will depend at least as much on the interpretation of unconscious factors as on the formal analysis of descriptive data.

All this has an important bearing on the classification of research personnel. As was pointed out in our last Editorial, clinical workers in the field of delinquency suffer from an increasing sense of frustration in that their varied practical experience is not adequately exploited in the more organized projects of research sponsored by trained investigators. It is a matter of some urgency that this sense of frustration should be relieved. To the practical worker, nothing is more depressing than to see the material he has accumulated during years of laborious effort go to waste for lack of proper screening. On the other hand, nothing is more depressing to the research student than the sight of cartloads of case-records which, because of incomplete and indiscriminate case-taking, are valueless for research. Granted that special researches call in most instances for special case-records; granted further that only a small proportion of day-to-day workers in applied psychology or sociology are of the stuff of which investigators are made; and, still further, that the born research worker whether descriptive or interpretative, must also be made by intensive training in his particular technique, it does not seem impossible to devise some means whereby better use can be made of the innumerable and valuable observations made by field workers who, whether or not they are gifted in drawing conclusions, stand in the most immediate contact with case-material.

A first step in this direction is obviously the development of case-frames

which can serve the practical purposes of the clinical worker and at the same time satisfy the requirements of the research student. The systematization and publicizing of research problems would also promote economy of effort. But even more important than these is the recognition by the humblest clinical worker of the essential part he can play in promoting research. If he can interpret as well as make observations so much the better. But if he cannot, and in many instances he has neither the time, nor the necessary flair, nor even the urge to do so, he can at least put his data at the disposal of those who can.

To make such a system effective two conditions must be fulfilled. In the first place, a 'screening' organization of trained research workers must be built up in order to sift, elaborate and interpret data that have not been worked over. This in turn calls for generous subsidies by interested bodies both public and private. The preliminary surveys and pilot-researches necessary to establish the frames of reference of any given project may cost up to a thousand pounds. Indeed, it is high time that a psychological and sociological counterpart of the Medical Research Council were organized and provided with funds adequate to deal with the extensive arrears of research in these subjects. And in the second place, there is urgent need for propaganda amongst field workers to convince them that they can play a fruitful part in research. Clinical workers are notoriously hard to persuade in this matter. Devoted to the practical aspects of their work, and often with a positive distaste for theoretical exploitation of it, they rarely respond to appeals for scientific contributions, however small. Needless to say, it is not the size of the contribution that matters. The simple record of a dream, brief observations of unusual clinical data, might well provide the missing link in a chain of evidence or even the first stepping stone to some revolutionary discovery. Like the soldier who carries a field-marshal's baton in his knapsack, the field worker who trains himself for the purpose may acquire more than passing fame as a pioneer in research.

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It is indisputable that, as Dr. Epps points out in her paper on Borstal Girls published in the present issue, comparatively little research has so far been carried out in this country on the problems of the delinquent girl.

Sir Cyril Burt, it is true, included a number of girls in the material used for his 'Young Delinquent', and he also devoted a special study to the 'Causes of Sex Delinquency in Girls' (1926). The next step was Dr. Grace Pailthorpe's psychiatric investigation of a hundred female offenders aged between sixteen and thirty in Holloway Prison ('Studies in the Psychology of Delinquency', 1932), a contribution incidentally which was partly

responsible for the development of the I.S.T.D. Since then, hardly any systematic research has been done in this field. Apparently, the situation is not much more satisfactory in other countries, with the exception of the U.S.A., where the Gluecks published their ' Five Hundred Delinquent Women ' in 1934. Sven Ahnsjö, in his very detailed study of 2,448 female inmates of Swedish Reformatories and Detention Homes (' Delinquency in Girls and its Prognosis ', 1941, *Acta Pædiatrica*, Vol. XXVIII, Supplementum III, Lund), stated that ' inquiries concerning delinquent girls are comparatively few and those at disposal are mostly founded on very restricted material. Especially as to the prognosis of delinquent girls reliable information is lacking '.

This neglect is all the more regrettable as, in spite of their relative infrequency, the problems of delinquent girls are far more complicated and the present methods of dealing with them far less satisfactory than in the case of boys. ' With regard to the senior girls' schools we have some doubt about the value of institutional treatment ', wrote the Curtis Committee (' Report of the Care of Children Committee ', 1946, paragraph 499). ' These schools are dealing largely with the over-sexed adolescent, and are handling a problem to which, according to our witnesses, no satisfactory solution has yet been found.' Similar doubts were expressed in a pamphlet 'The Unstable Adolescent Girl', published in the same year by the joint Committee on ' Psychiatry and the Law ' of the British Medical Association and the Magistrates' Association.

With regard to the slightly older Borstal group, their specific needs and the unsuitability, frankly admitted by the Prison Commissioners, of the main Borstal Institution at Aylesbury, have just been stressed again in the Howard League pamphlet on ' Borstal ', reviewed in the present issue. It is particularly valuable, however, to have the crucial facts of the present situation set out so clearly and dispassionately in Dr. Epps's survey: no trained social worker available for home visits and for preventive work with younger members of the family; no psychologist available for the testing and other psychological work indicated by Dr. Epps (under No. 9); no separate Allocation Centre to reduce the danger of contamination (it is gratifying, though, that the Reception Centre has recently been transferred from Holloway to Aylesbury); not enough small open Institutions; no facilities for group therapy and, apparently, too few for individual psychotherapy; and no special Institution for the most difficult cases. And to this list might be added the need for much better training of staff which might well reduce the demands made on the services of psychiatrists and psychologists who are so difficult to secure at present.

OBITUARY

DR. E. T. JENSEN

On July 3, 1950, Dr. E. T. Jensen, co-founder, Vice-President and Chairman of the Executive Council of the *Institute for the Study and Treatment of Delinquency*, died suddenly at the age of seventy-six.

The descendant of a Copenhagen family, Ernest Thomas Jensen was born in this country in 1873. He studied medicine at Guy's Hospital and graduated M.B. in 1901. He was at one time civil surgeon at the Herbert Hospital, Woolwich, served with the Field Force in the Boer War, and subsequently became medical officer to an expedition exploring in East Africa. During his later professional career he exhibited a catholic interest in many branches of medicine. He was founder and honorary secretary of the Tropical Diseases Prevention Association and a Fellow of the Society of Tropical Medicine and Hygiene. He was also honorary treasurer of the Brunswick Trust for cancer research. During the war he played an active and arduous part in civilian defence work, and despite the many claims on his time became a Vice-President of the Medical Society for the Study of Radiesthesia. He was also a member or fellow of many medical societies.

Dr. Jensen will, however, be remembered not so much for his strictly medical services as for the part he played in founding and developing what is now known as the *Institute for the Study and Treatment of Delinquency* (*I.S.T.D.*). This was the result partly of his catholicity of taste, partly of a scientific curiosity which led him to take an interest in new developments of any kind, and partly of an inclination to respond generously to social causes, all the more if they happened to be none too popular. He belonged, in fact, to that band of supporters of good causes, drawn from a variety of cultural groups, who in this country and especially in London have always been ready to throw their energies into new movements or philanthropic enterprises, passing as a rule from one to another with undiminished zest. In Dr. Jensen's case the treatment of delinquency proved to be a lasting pre-occupation. Trained at a time when medical psychology was of the most rudimentary order, he lived to see psychological principles firmly established in the field of mental disorder. Recognition of their value in the approach to social disorder was, however, much more tardy and even yet the idea of treating pathological criminals otherwise than by penal measures can scarcely be said to have a popular appeal. In 1931, when

Dr. Jensen first became interested in the subject, it was still popularly regarded as a hunting-ground of cranky reformers and woolly-minded humanitarians.

The circumstances of his association with this new branch of Social Medicine are worthy of record. A few years earlier, Dr. Grace Pailthorpe had embarked on a psychological research of some prison populations, and had later presented a report on the subject to the Medical Research Council which had subsidised her researches. This attached special emphasis to the psycho-analytical factors present in criminal cases. She had also prepared for publication a book on the subject, subsequently issued under the title 'What We Put in Prison', by Williams and Norgate. Seeking to secure support for her views and to publicize the aims of her work, Dr. Pailthorpe approached Dr. Jensen. In July, 1931, together with Mrs. Charles Tharp and Victor B. Neuburg, they formed the executive committee of an *Association for the Scientific Treatment of Criminals*. For some months this committee devoted its energies to strengthening the *Association*, and publicizing the work of Dr. Pailthorpe; but by the end of the year it began to explore the possibilities of developing an observation centre for delinquents. In December, 1931, Dr. Jennings White joined the Association and was followed in January, 1932, by Dr. Edward Glover, acting in place of Dr. Pailthorpe, who had gone abroad. Under their direction the aims of the *Association* were expanded, and in May, 1932, Dr. Glover put forward concrete proposals regarding the activities of the *Association*, in particular the development of an out-patient clinic. In the following month Dr. Emanuel Miller joined the *Association*, and with his assistance, together with that of Dr. A. C. Wilson and Dr. Worster Drought, negotiations were opened with the West End Hospital for Nervous Diseases as to the possibility of setting up a Psychological Clinic for treatment of offenders in that Hospital. By September, 1932, a scientific advisory committee was formed under the Chairmanship of Dr. Glover, the name of the Association was changed to the *Institute for the Scientific Treatment of Delinquency*, a panel of psychologists willing to work for the Institute was formed, and a course of public lectures was arranged. The Inaugural Meeting of the *Institute* was held in November, 1932, and after prolonged preparation the Psychopathic Clinic was opened at the West End Hospital in September, 1933.

Throughout all this period of preparation Dr. Jensen, in his function as Chairman of the Executive Committee, gave unsparingly of his time and energy; administration of the *Institute* was carried out in his house at 56 Grosvenor Street, which continued to be its centre until after a successful public appeal the Psychopathic Clinic was established in premises of its own in Portman Street in 1937. During the war, owing to enemy action, a move was made to Manchester Street and after the war a second move

to the present premises of the Institute at 8 Bourdon Street, Davies Street, W.1. In 1948 the Psychopathic Clinic, by then a flourishing organisation with a large voluntary staff, was handed over to the Ministry of Health and became part of the National Health Scheme, known as the *Portman Clinic* (*I.S.T.D.*). As arranged during negotiations with the Ministry, the Institute retained its status as a voluntary organization and private enterprise, continuing, however, to operate in close liaison with the Clinic and occupying rooms in the same building. Preliminary arrangements were then made for its incorporation under the title of *Institute for the Study and Treatment of Delinquency*. This involved an entire re-organization of the *Institute* and the expansion of its activities in the direction of teaching, training, research organization and scientific publication. In these fresh developments Dr. Jensen, though handicapped by frail health and increasing deafness, continued to take an active administrative interest until the day of his death.

The story of Dr. Jensen's association with the *I.S.T.D.* illustrates once again how progress in a field of science can be advanced by the activities of workers without the field. In the case of delinquency much of the impetus to research came from without, from persons whose primary interest was in social reform rather than in clinical and social psychology. Dr. Jensen in fact followed, although independently, the honourable traditions established by the *Howard League for Penal Reform*. He did not profess to be either a trained psychologist or a trained sociologist: yet, in fact, he deserves to be remembered for his services to social medicine. Combining the training of a physician and explorer with the warmth of heart and enthusiasm of a social reformer, he embarked on activities which call for some of the patience, doggedness and optimism of a pioneer.

Those who had the opportunity of working with Dr. Jensen were quick to recognize those qualities in him: a quiet courtesy and humour, fertility of resource in the many administrative difficulties with which he was faced, and an almost boyish optimism which could not be shaken by any reverse. To these he added a consistent kindliness and generosity in his many social contacts. The breadth of his cultural interests—he was in private life an art connoisseur of note—could not be mistaken. He was a man of distinguished, almost ascetic cast with a somewhat frail, stooping figure. His memory will long remain with those colleagues who were associated with him in what proved to be a successful pioneering experiment in social medicine and which in fact remains a lasting tribute to his venturesome and unquenchable spirit.

EDWARD GLOVER.

CONDUCT DISORDERS IN CHILDREN AGED FIVE TO FIFTEEN YEARS

By W. WARREN (LONDON)

The present surge of interest in juvenile delinquency has led to proposals for large-scale psychiatric investigations into its causes; to plan a suitable research project is a difficult task, and further preliminary explorations of the subject from differing points of view are necessary. The critical analysis of material from a psychiatric clinic, available in carefully recorded clinical case-records of children showing anti-social behaviour, is a form of reconnaissance that may help towards the planning of more ambitious research.

Most of our knowledge of the established delinquent has been built up from the records available from the Courts of those charged with some offence. These must inevitably exclude 'pre-delinquent' children, and those below the age of eight. Such publications, mainly from a sociological point of view, date from the classical works of Healy (1915) and Burt (1925), and many others have since followed. They all stress the complexity of the etiology of delinquency to which a wide range of factors—moral, sociological or psychological—may contribute. Many of these factors may overlap and by no means all will be seen in a particular case. Amongst them, emotional maladjustment is believed by psychiatrists to play an important part with children showing long-standing or serious anti-social behaviour. Even so, social factors may also be important contributors, and a leading article in the *British Medical Journal* (1950) rightly pointed out the significance of the biological factor in the preponderance of delinquency among boys.

The psychiatric approach to anti-social conduct has been described and developed in such works as those by Aichhorn (1935), Healy and Bronner (1936); and recently Eissler (1949) has given a comprehensive account of the psycho-analytical viewpoint. All have laid emphasis on certain factors of emotional significance, leading, with other factors, to severe and persistent delinquency. Of cardinal importance is the child's sense of being more or less unwanted by parents who are themselves unstable and unhappy people and whose attitudes are on balance, hostile, critical and punishing. Friedlander (1947), Bowlby (1944), Bender (1947), and others have all emphasized even more the importance of prolonged separation of the child from the mother, or established foster-mother, during the first five years in leading to a high proportion of the most intractable cases of anti-social behaviour. Again, the key to the long-standing problem

why some children become delinquent when exposed to bad influences while the majority of children remain well behaved, although not yet found, may, according to Bowlby (1949), lie in the relation that the child had with his own parents in his early years. Similarly, Friedlander (1949) referred to the analogous problem, why some children become neurotic and others delinquent, pointing out that there is no fundamental difference between unconscious conflicts underlying neurotic symptom formations and unconscious conflicts causing those delinquent actions which might be called 'delinquent symptoms.' She suggested (1945) that anti-social character formation might arise from a constant alternation of too much frustration and too much gratification of primitive instinctive drives.

The etiology of delinquency has thus been explored from the psychiatric viewpoint and has reached a stage where such hypotheses as those quoted have been put forward. Their further critical examination in the light of any evidence that can be brought to bear is needed; it is notable, for instance, that less notice has been taken of the father than the mother. Further attention to the symptoms shown by delinquent children, and especially the younger ones, may be enlightening.

Mannheim (1949) has stressed the need to distinguish between Court cases of delinquents, Court cases of non-delinquents, non-Court cases of delinquents and non-Court cases of non-delinquents. Children attending a psychiatric clinic include all these, although the fact of their referral by some agency for examination or treatment must in itself put them in a special category. Some children with conduct disorders may come at the request of a Juvenile Court, others may come from different sources, too young to be charged with some offence or not having come to the notice of the Courts. Many show 'neurotic' symptoms intermixed with those of anti-social significance, and finally many children referred by other agencies show no anti-social behaviour. In psychiatric practice no exact delimitation between the delinquent and non-delinquent child can be found. All Mannheim's categories can be compared and contrasted at different age levels, both as regards their etiology and the symptoms that they may show.

PRESENT INVESTIGATION

The records of 548 children between five and fifteen years, referred to the Children's Department of the Maudsley Hospital since 1947, were first examined for symptoms indicative of emotional disturbance. These comprised on the one hand 'neurotic' symptoms: overt anxiety, obsessional and hysterical symptoms, hypochondriasis, depression and ideas of reference; functional disturbances of the motor system, alimentary system, and urogenital system; disturbances of sleep and speech; tension habits,

gratification habits, outbursts of temper. On the other hand, under conduct disorders were grouped: disobedience, fighting, lying, stealing from home or elsewhere, destructiveness, truancy from home or school, sexual misdemeanours, and occasionally fire-setting.

Children with organic disease of the central nervous system, with marked abnormalities of the electro-encephalogram, psychoses, and all those with an intelligence quotient below 85 were excluded for this purpose.

Amongst children between five and eight years (251 cases: 186 boys and 65 girls):

38·6 per cent. had neurotic symptoms only;

23·5 per cent. conduct disorders and only a few neurotic symptoms;

37·9 per cent. conduct disorders and well-marked neurotic symptoms.

Amongst children between nine and eleven years (117 cases: 81 boys and 36 girls):

41·9 per cent. had neurotic symptoms only;

36·7 per cent. conduct disorders and only a few neurotic symptoms;

21·4 per cent. conduct disorders and well-marked neurotic symptoms.

Amongst children between twelve and fourteen years (180 cases: 125 boys and 55 girls):

49·3 per cent. had neurotic symptoms only;

30·7 per cent. conduct disorders and only a few neurotic symptoms;

20·0 per cent. conduct disorders and well-marked neurotic symptoms.

These figures are of interest in showing the range of symptoms as between neurotic disorders and conduct disorders. No conclusions can be drawn from them, as they are dependent on the variable factors determining what class of children are referred to the hospital. The number of children with both conduct disorders and neurotic symptoms was high, the highest percentage being in the youngest age group. This may indicate that the distinction between neurotic disorders and conduct disorders was less marked in these younger children and bears out to some extent a clinical impression that younger children (below eight), who are anti-social in their conduct, may be more overtly disturbed emotionally than older children who are anti-social. The child may come to form a precarious adjustment emotionally by means of delinquent acts. Exceptions to this include those children who begin to commit anti-social acts in association with the stresses of adolescence (Friedlander, 1949).

Further examination of these records revealed that one form of conduct disorder seldom occurred alone, but stealing was the most common symptom at all ages. Lying, truancy and disobedience were in that order somewhat less common, but still closely associated with stealing and with each other. Less common, but again associated, were destructiveness and

fighting; sexual misdemeanours were mostly confined to older children, and were the least common conduct disorder at all ages.

Following these findings, a group of 90 records of children from Greater London between the ages of five and fifteen, under treatment for conduct disorders, were analysed in detail and compared with the records of 70 children of the same age levels under treatment for neurotic disorders. Established and persistent stealing was taken as necessary for inclusion amongst the former group; and well-marked symptoms regarded here as 'neurotic' for inclusion amongst the latter. Even so, it was at once apparent that many of the former also showed other conduct disorders and a number of neurotic symptoms, while even minor misconduct was rare amongst the latter. As far as possible the sex incidence between the groups was kept equal. It was not possible to use normal controls. Again, children with organic disease and well-marked abnormalities of the E.E.G., were excluded. The range of I.Q. was between 80 and 137 in the case of children with conduct disorders, and between 80 and 146 in those with neurotic disorders.

These were subdivided into the following subgroups:

(1) (*a*) **20** children (19 boys and 1 girl) with conduct disorders, aged between five and seven years, who had not been charged in Court.

(*b*) **20** children (18 boys and 2 girls) of the same age group with neurotic disorders.

(2) (*a*) **20** children (16 boys and 4 girls) with conduct disorders between eight and eleven years, who had not been charged in Court.

(*b*) **25** children (24 boys and 1 girl) with conduct disorders, between eight and eleven years, who had been charged in Court.

(*c*) **25** children (21 boys and 4 girls) with neurotic disorders, of the same age group.

(3) (*a*) **25** children (21 boys and 4 girls) with conduct disorders, between twelve and fifteen years, who had been charged in Court. There were insufficient children of this age, who had not been charged in Court, to form a group.

(*b*) **25** children (21 boys and 4 girls) of the same age group with neurotic disorders.

The purposes of this analysis were to try to establish what significant differences in etiology and symptomatology—if any—there were between children with:

(1) Conduct disorders at one age level and another.

(2) Conduct disorders who had not been charged in Court and those who had already been charged with some offence.

(3) Conduct disorders and neurotic disorders at these age levels.

It was considered of interest to present more data on children who,

because of youth or other reasons, had not been charged in Court, and also to emphasize the age factor in the evolution towards established delinquency. Any conclusions, however, need to be judged by the fact that these are children who have been referred to a psychiatric clinic, and as such may not necessarily be applicable to those not so referred.

ETIOLOGY

A number of etiological factors were chosen for analysis, to present a broad picture of the ascertainable events believed to have been causative to these children's present condition. Most could be measured objectively, but some depended partially on subjective assessment by the observer. It was considered possible to make this with sufficient accuracy for the purposes of this investigation with the careful records available. The grouping and analysis of etiological factors can only demonstrate those which are most commonly present; the differences between the two main groups, however, clarify and emphasize those which appear to be significant in leading to conduct disorders on the one hand or to neurotic disorders on the other.

The etiological factors chosen were analysed below, and for the purposes of comparison the group of patients with mainly conduct disorders will be called *Group A* and those with neurotic disorders *Group B*.

These two main groups were also compared statistically. (The statistical method used was ' The significance of the difference between percentages,' pp. 80–81, ' Statistical Methods and Research,' P. O. Johnson, Prentice-Hall, Inc., New York, 1949.) The totals in the sub-groups were too small for a similar statistical evaluation, but in most instances the incidence of the etiological factors was fairly uniform as between younger and older children in both groups and between Court and non-Court cases. However, any marked differences between the sub-groups will be pointed out where appropriate:

(1) ETIOLOGICAL FACTORS OF CONSTITUTIONAL IMPORTANCE

The Family History. Inquiry into this was confined to grandparents, parents and their siblings, and the patient's siblings; about whom it was possible to obtain accurate information. Abnormalities in these relatives were divided into:

Psychoses in the past or present.
Epilepsy, well-marked psychopathy or a criminal record.
Neuroses of all kinds.

Their genetic importance was considered here; the effect of consequent abnormal behaviour of these relatives on the environment of their children will be assessed under other headings.

Physical Disease. The occurrence in childhood at any age of illness, if serious, long drawn-out or recurrent, is likely to affect adversely his well-being, and can be a factor of importance in leading to neuroses or conduct disorders. It may hamper the growth of independence, for instance, especially as it may be accompanied by over-solicitude of relations.

This factor was included when it was considered to have interfered with physical well-being. Well-marked inanition or eczema in babyhood, recurrent otitis media, pneumonia leading to empyema, and recurrent bronchitis and asthma are examples. No disease of the central nervous system occurred in this series.

Malnutrition. This is seldom seen in London children these days.

Other factors of constitutional importance include *major abnormalities in the electro-encephalogram, and mental backwardness* (I.Q. below 80). Children with either were excluded for the purpose of this study.

The incidence of these factors in percentages is given in Table I.

Analysis of Table I. These children showed that the percentage incidence of factors of genetic importance was no higher than in psychiatric patients in general. Comparing Groups A and B, the incidence of epilepsy and psychopathy was more frequent in Group A, and significant at the 5·0 per cent. level. No other significant differences were noted, except for malnutrition, which was more frequent in Group A and at the 5·0 per cent. level.

The E.E.G. was done in 14 out of the 90 children in Group A and minor abnormalities were found in five instances; and in 9 out of the 70 children in Group B with 2 minor abnormalities. This difference was not significant.

(II) FACTORS SOCIALLY ILL-SUITED TO THE PATIENT

Such factors as these have been implicated in most surveys of delinquency as of etiological importance, and much social work has been directed towards their prevention or amelioration. Nevertheless, it is well known that the majority of children resist such potentially harmful social influences and remain stable; free from misconduct or neuroses. Other factors in combination with them are needed to lead to instability.

In this investigation the following social factors were assessed:

Poverty. Relative in that the child and his family had insufficient money for a modest working-class standard of living, or *absolute* in which necessities were lacking.

Overcrowding in the Home. Relative in that the family needed more rooms, or *absolute* in that the home was grossly overcrowded. This factor was expected to be common in these days of housing shortage in London.

A Bad Neighbourhood. Slum conditions with inadequate space for play, no gardens, overcrowded or severely bomb-damaged surroundings. This was included as a factor when attention was drawn to these conditions as being detrimental to the child concerned.

Bad Companions. Children who were already offenders or stated by the parents to combine with the child in misconduct.

The incidence of these factors in percentages is given in Table II.

Analysis of Table II. Comparison of Groups A and B showed that:

Poverty, both absolute and relative, were more frequent in incidence in Group A but only absolute poverty was significant at the 5·0 per cent. level.

Overcrowding, both absolute and relative, were also more frequent in incidence in Group A, and both were significant at the 5·0 per cent. level.

A Bad Neighbourhood and *Bad Companions* were both more frequent in incidence in Group A, both being significant at the 0·05 per cent. level.

(iii) Factors emotionally ill-suited to the patient

Psychiatric treatment of a child and his parents allows the observer to gain considerable insight into emotional influences surrounding the child. They are of cardinal importance in leading to maladjustment, although some are difficult to extract for statistical assessment. Clear and easily defined factors are necessary for this but the subtleties of the situation must not be missed, and cause and effect need to be allowed for. For instance, a weakly child may invite over-protection; or a hostile parent may be an important causal factor in leading to a conduct disorder in a child; (but on the other hand misconduct may lead to hostility from the parent). In view of the importance of the influences of the parents on the child in the early years of life, stressed by many previous investigations, it was decided to analyse in detail parental influences or their lack. In addition, a number of other factors of emotional significance in the home or elsewhere were analysed.

Maternal Influences. These were divided into the following:

Maternal Lack. (i) For at least six months or more during the first five years of life, without a settled and adequate maternal substitute. The lack in the majority of these children lasted considerably longer than six months.

(ii) Maternal lack for at last six months or more after the first five years of life without a settled or adequate maternal substitute.

(iii) Relative lack of the mother due to work outside the home, during the period before or during the present disorder of the child.

In the cases of four children with conduct disorders and two with neurotic

disorders, the loss of the mother by death, divorce or separation led to the father's remarriage. The stepmother is categorized where appropriate.

Maternal Over-solicitude. This implied such concern over and cosseting of the child in health and sickness as to be detrimental.

Maternal Under-solicitude. This term implied a lack of proper care and management throughout the child's life.

Maternal Over-anxiety. This comprised overt anxiety expressing itself verbally, in behaviour or in neurotic symptoms, and was more than any provoking situation required. Some was expressed in relation to the child under review, some was more general. It was divided into the following factors:

(i) Over-anxiety before the present disorder of the child began.

(ii) Over-anxiety arising with the present disorder of the child.

Maternal Under-anxiety. Here the mother showed a marked lack of anxiety in situations which would normally provoke it, and implied in these cases a lack of interest or concern over the child.

Maternal Hostility. This was only counted as positive when it was expressed overtly with reference to the child under review, implying that the child was unwanted, resented or disliked. Some mothers, where rejection of the child was well hidden, may have been omitted. In view of the probability that misconduct was likely to provoke hostility, it was divided into the following:

(i) Hostility before the present disorder began.

(ii) Hostility beginning with the present disorder.

Maternal Over-restriction. Here the child was not allowed a reasonable amount of freedom.

Paternal Influences. These were divided into the same factors as maternal influences:

Paternal Lack. This was everywhere higher than maternal lack, and the fact that many of the children of the generation under review had fathers away at the war must be taken into account in judging these factors.

(i) For at least six months or more during the first five years of life, without a settled and adequate paternal substitute. The father was in most cases away for years.

(ii) Absence for at least six months or more after the first five years of life, without a settled or adequate paternal substitute.

(iii) Relative absence of the father was counted when his work meant so much absence from home as to lessen a father's normal influence, and included such work as night work, lorry driving and travelling.

The mothers of eight children with conduct disorders and one with a

neurotic disorder, whose fathers had died, deserted, been divorced or separated, later remarried. The stepfather was categorized where necessary under appropriate headings.

Paternal Over-solicitude.

Paternal Under-solicitude.

Paternal Over-anxiety. (i) Over-anxiety before the present disorder began.

(ii) Over-anxiety arising with the present disorder of the child.

Paternal Under-anxiety.

Paternal Hostility. (i) Hostility before the present disorder began.

(ii) Hostility beginning with the present disorder.

Paternal Over-restriction. The incidence of these factors in percentages is given in Table III.

Analysis of Table III. (*a*) Exceptions to an even spread of these factors throughout most of the sub-groups were maternal and paternal lack before the age of five, which were more frequent in the younger age groups; their lack after five was more frequent in the oldest children and did not occur in those under eight. This was due to the ages of the children in relation to the war.

(*b*) Comparison of Groups A and B as a whole showed the following:

Maternal Lack. This before the age of five was predominant in Group A and was at the 0·05 per cent. level of significance. In view of its alleged importance in the early years of life, the causes of it are given in more detail:

Group A. Children with Conduct Disorders. Maternal lack due to:

Evacuation of the child	24
Mother ill or in hospital	2
Mother died	3
Mother away at work	1
Child lodged with a number of relatives	2
Child sent to an institution	3
Child sent to a foster home	2
Desertion, divorce or separation of mother	4
Total	41 (45·5 per cent.)

Group B. Children with Neurotic Disorders. Maternal lack due to:

Evacuation of the child	4
Mother died	1
Child lodged with a number of relatives	1
Child sent to an institution	2
Mother divorced or separated	3
Total	11 (15·7 per cent.)

Evacuation was the commonest reason for maternal lack in children with conduct disorders; the other causes also accounted for well-marked differences between the two groups.

Maternal lack after five was much less frequent and for lesser periods of time, but the difference between Groups A and B was not statistically significant.

Relative lack of the mother from work outside the home, however, was again more frequent in Group A, the significance being at the 1·0 per cent. level.

Paternal Lack. Before the age of five this was again more frequent in Group A. The difference was significant at the 0·05 per cent. level. The causes of it are given in more detail:

Group A. Children with Conduct Disorders. Paternal lack due to:

Evacuation of the child	14
Father away in the services	28
Father died	4
Child illegitimate	6
Desertion, divorce or separation of father	9
Father in prison	1
Total	62 (68·9 per cent.)

Group B. Children with Neurotic Disorders. Paternal lack due to:

Evacuation of the child	5
Father away in the services	14
Father died	2
Desertion, divorce or separation of father	6
Total	27 (38·6 per cent.)

Evacuation of the child and war service by the father accounted for the majority of paternal lack in both groups, although there were well-marked differences between the two groups from these and other causes.

Paternal lack after five years was less frequent except in the eldest children, and there was no significant difference between the two groups. Relative absence because of work was again more frequent in Group A, and significant at the 5·0 per cent. level.

In many instances in this series the child was away from both parents at the same time for at least six months before or after the age of five. In no instance before the child was five was the mother absent alone, while the father remained with the child; after five it rarely occurred. The differences between the percentage frequencies of lack of the mother and the father indicate those instances where the father alone was absent.

Over-solicitude and Under-solicitude. On the part of the mother the

former was more frequent in Group B and significant at the 0·05 per cent. level, while the latter was more frequent in Group A and significant at the 0·05 per cent. level. On the part of the father, over-solicitude was much less frequent and was almost equal in the two groups. Under-solicitude was again less frequent in the father than in the mother, and although more frequent in Group A, the difference between the two groups was not significant.

Over-anxiety and Under-anxiety. In the mother, over-anxiety was significantly more frequent at the 0·05 per cent. level in Group B prior to the present complaint of the child. With the onset of the present disorder there was a rise in incidence, the rise being most marked in the sub-groups consisting of the mothers of the youngest children with conduct disorders; again it was more frequent in Group B and significant at the 0·05 per cent. level.

In the father, the incidence of over-anxiety was different. Infrequent before the present disorder and with little difference between the two groups, there was a fair rise with the present disorder in Group A so that the difference between the two groups was now significant at the 1·0 per cent. level.

Under-anxiety was more often seen in the mother in Group A, and was at the 5·0 per cent. level of significance. In the father it was only found in one instance in Group A.

Hostility. In both parents, hostility before the present disorder showed no significant difference between Groups A and B. With the onset of the present disorder, there was a significant rise in hostility against the child in Group A ; it was significant at the 0·5 per cent. level in the mother and the 1·0 per cent. level in the father.

Over-restriction. Although more frequent in the father than in the mother, the difference between Groups A and B was not significant.

OTHER FAMILY INFLUENCES

Spoiling of the Patient. This term meant over-indulgence of the child in the material sense by the elders in the home, and lax discipline on occasions when correction was needed.

Patient an Only Child or Separated by a Large Gap from other Siblings.

Disturbance of the Attitude of other Siblings to the Patients. Such included hostility, bullying or jealousy by one or more siblings of the patient.

The Presence of other Persons in the Home, who could Disturb Family Harmony. Grandparents, a new step-parent, other relatives, or a landlady, were examples. The incidence was high because of housing difficulties.

Socially bad or corrupting Influences in the Home. These included most commonly parental quarrels, cruelty by the father, or violence, bullying, sexual irregularities by the parents or others, the presence of a mistress, and frequent separations and reunions of the parents. The factor was closely associated with parental influences already categorized.

INFLUENCES OUTSIDE THE HOME

Conditions at School Harmful to the patient. This was occasionally seen, and included bullying by other children, or rejection and hostility by teachers or children. It usually followed disturbed behaviour by the child in school, but helped to enhance his disturbance.

Required Educational Standards beyond the Capacities of the Child. This was commonly seen in all sub-groups, particularly amongst older children. In a few it was due to the child's intelligence being too low for the class or school in which he found himself; many had slipped behind because of their difficulties in concentration, and some from truancy. This factor tended to enhance symptoms already present, but was not considered causative as a rule.

Conditions Outside Home and School Harmful to the Patient. This factor was only found in one neurotic child, where an aunt had exerted a harmful influence.

PSYCHOLOGICAL TRAUMA TO THE CHILD

This represented some definite traumatic incident and examples were found in all sub-groups. It included: death of a parent or other near relative; violent assault by the father; involvement in a bomb incident; sexual assault, etc. Although apparently a precipitating factor in some children, it was not possible to measure its effect in others.

EVACUATION

This important event happened commonly to many normal children apart from those under consideration here. It was divided as follows:

(i) Evacuation without the mother before the age of five for at least six months. Some even so had regular visits from the mother, and it was then not counted also under the factor—maternal lack.

(ii) Evacuation without the mother after the age of five for at least six months.

(iii) Evacuation with the mother.

The incidence of these factors in percentages is given in Table IV.

Analysis of Table IV. (*a*) The incidence of 'educational standards beyond the capacities of the child' was, as was to be expected, more frequent

in the older children than in the younger ones. Similarly, evacuation after five was more frequent among the older ones because of the relationship of their age level to the war. Under the heading ' influences elsewhere ' there was little difference between Court and non-Court cases.

(*b*) Comparison of Groups A and B showed the following: The incidence of spoiling of the child, disturbances of the attitude of other siblings to the patient, and the presence of other persons in the house who could disturb family harmony, were all more frequent in Group A, but these were not significant. The incidence of only children was, however, more frequent in Group B, and significant at the 5·0 per cent. level.

In contrast, the incidence of socially bad or corrupting influences in the house was more frequent in Group A and significant at the 1·0 per cent. level.

The incidence of bad influences at school, educational standards beyond the capacities of the child, and bad influences elsewhere were nearly equal in the two groups.

The incidence of psychological trauma was more frequent in Group B, and significant at the 0·05 per cent. level. The incidence of evacuation without the mother was significantly more frequent in Group A both before and after the age of five, and at the 1·0 per cent. level. Evacuation with the mother was nearly equal in the two groups.

SUMMARY OF ETIOLOGICAL FACTORS

Analysis of the etiological factors in these two groups of children with conduct disorders and neurotic disorders, and divided into sub-groups according to age level and whether charged in Court or not, made the following points clear:

(i) The incidence of the factors in Court cases and non-Court cases of children with conduct disorders who attended hospital was very similar, although numbers were too small for statistical evaluation.

(ii) The incidence of the factors also showed a close similarity between one age level and another, in children with conduct disorders and those with neurotic disorders. Exceptions to this general finding were the higher incidence of the effects of educational pressure on the older children, and the fact that war with evacuation and the removal of the father hit those children at varying ages according to their date of birth.

(iii) Comparison of the whole group of 90 children with conduct disorders with the whole group of 70 children with neurotic disorders emphasized the importance of some etiological factors.

Thus, factors socially ill-adapted to the patient—overcrowding, a bad neighbourhood, bad companions and absolute poverty—were in varying

degree significantly more frequent in those with conduct disorders. Socially bad or corrupting influences in the home, and evacuation without the mother before and after the age of five, were also significantly more frequent in this group. On the other hand, the incidence of only children and psychological trauma were significantly more frequent preceding a neurotic disorder.

Those factors which covered the attitudes and influences of the parents towards the child under examination showed further significant differences between the two groups. Maternal over-solicitude and over-anxiety were significantly more frequent prior to a neurotic disorder in the child. The same attitudes in the father were not so frequent and were not significant. On the other hand, under-solicitude and under-anxiety on the part of the mother was significantly more frequent in association with a conduct disorder in the child, but the same attitude in the father was less frequent and not significant.

Parental hostility to the child, although more frequent before the onset of a conduct disorder, was not significant. Once the disorder had begun, hostility from both parents became significant, more so than in the case of neurotic disorders. Similarly there was a considerable and significant increase of paternal anxiety.

Lack of the mother for six months or more in the first five years of life occurred in just under half of those who subsequently developed conduct disorders, and was significantly more frequent than in those who developed neurotic disorders. Paternal lack in the first five years was even more frequent in those with conduct disorders than in those with neurotic disorders. After the age of five, parental lack showed no significant difference between the two groups. Finally, relative absence of both parents at work was significantly more frequent in those with conduct disorders. These figures of parental lack are high, and the war was partly responsible for them, so that they must be judged in the light of this and the fact that the same thing undoubtedly happened to many children of similar ages, who did not develop conduct or neurotic disorders.

SYMPTOMATOLOGY

The records of these children were also examined for the presence of overt psychiatric symptoms here called 'neurotic' and the following were found:

Disorders of Function

(*a*) Disturbances of the motor system: (i) Hyperactivity.
(ii) Tics.

(*b*) Disturbances of speech: Stammering.

(*c*) Disturbances of the alimentary system: (i) Eating (food fads).
(ii) Encopresis.
(*d*) Disturbances of the urogenital system: Enuresis.
(*e*) Disturbances of sleep: Restlessness, nightmares, night-terrors, sleep-walking.
(*f*) Gratification habits: Thumb sucking, pre-adolescent genital play.
(*g*) Tension habits: Nail biting, picking, scratching.
(*h*) Temper tantrums.

Well-defined Emotional Attitudes

(*a*) Undue dependence—usually on the mother.
(*b*) Timidity: Inhibited, shy, submissive.
(*c*) Aggressiveness: Irritability, stubbornness, sulkiness. Boisterousness, assertiveness, demanding, domineering.

Disturbed Family and Social Relationships

(*a*) Towards the mother.
(*b*) Towards the father.
(*c*) Towards siblings.
(*d*) Towards school contemporaries.
(*e*) Towards the school, including the teachers, or to work.

Psycho-Neurotic Symptoms

(*a*) Anxiety expressed as fear, nervousness, agitation, various phobias: somatic symptoms—dizziness, palpitations, choking.
(*b*) Hysterical symptoms.
(*c*) Obsessional symptoms.
(*d*) Depression.
(*e*) Ideas of reference.
(*f*) Hypochondriasis.

Conduct Disorders

(*a*) Stealing from home.
(*b*) Stealing outside the home, from school, shops, etc.
(*c*) Lying.
(*d*) Disobedience at home, school, etc.
(*e*) Truancy from home.
(*f*) Truancy from school.
(*g*) Destructiveness.
(*h*) Fighting.
(*i*) Sexual misbehaviour: Masturbation, interference with other children, etc.
(*j*) Arson or fire-setting.

The children in the neurotic group showed few and only minor disorders of conduct. Many of those with conduct disorders, on the other hand,

showed neurotic symptoms in varying degree, and chiefly those labelled 'disorders of function.' Thus, 95 per cent. between the ages of five and seven showed them. The percentage in non-Court cases between eight and eleven was nearly as high (90 per cent.), while in Court cases of the same age level it was lower (64 per cent.). A rise occurred again (to 76 per cent.) in those aged twelve to fifteen, perhaps with the emotional stresses of puberty. No general conclusions can be drawn, as it is possible that the delinquent children with definite 'neurotic' symptoms may be recognized by parents or Court authorities as psychiatrically disturbed and referred to hospital. Many others not obviously disturbed may not have been referred. Again, parents may be more likely to seek psychiatric help if stealing is confined to the home, since stealing outside is likely to attract the notice of the police. Such factors may determine the child's disposal and partly account for these figures. Nevertheless, they again show the same tendency towards less differentiation between conduct disorders and neurotic disorders in the youngest children. Examination of much larger groups is required to elucidate this point.

TABLE V gives the percentage incidence of children at each age level who showed particular symptoms. The number in each sub-group was too small for statistical evaluation, but the totals of the two main groups—children with conduct disorders (Group A) and children with neurotic disorders (Group B)—were again compared for significant differences. Analysis of Table V shows the following:

Disturbances of Function. (*a*) The symptoms under this heading were distributed diffusely through all the sub-groups. The children at the youngest age levels (five to seven) with conduct disorders showed the highest percentage incidence of hyperactivity, tics, disturbances of speech, food fads, disturbances of sleep, and temper tantrums. The incidence of enuresis, gratification, and tension habits was more frequent in the non-Court cases between eight and eleven years.

The difference in their incidence between the younger and older children was not so apparent in the neurotic group.

These findings again help to confirm the clinical impression that the youngest children with conduct disorders show more overt neurotic disturbances of function than the older children.

(*b*) The incidence of most disturbances of function was on the whole lower in Group A than Group B. Those symptoms which were significantly less frequent were disturbances of sleeping, tics, food fads and tension habits. On the other hand, hyperactivity was significantly more frequent in Group A.

Such findings need care in the interpretation of their significance, as over

a quarter of the older children with conduct disorders showed no disorders of function.

Well-defined Emotional Attitudes. (*a*) Emotional attitudes are more enduring and less flexible than the disturbances of function, and there was little difference to be found between the various age levels in both groups.

(*b*) Aggressiveness was more frequent and significant at the 0·05 per cent. level in Group A. On the other hand, undue dependence (mostly on the mother) and timidity were more frequent and significant at the 0·05 per cent. level in Group B.

These differences point to a differentiation of early personality traits, as between one group and the other, in determining the type of disturbance to which they have succumbed. Hyperactivity and aggressiveness also appear clinically to be closely allied.

Disturbed Family and Social Relationships. (*a*) These showed no appreciable difference between one age level and another.

(*b*) Disturbed relationships to the parents, siblings, school companions, school and work were all more frequent in Group A, and all these differences were significant. Group A thus again showed more aggressive qualities.

Psycho-Neurotic Symptoms. (*a*) Overt anxiety appeared at all age levels in both groups, while hysterical, obsessional and hypochondriacal symptoms, and depression were almost only to be seen in the oldest children in Group B.

(*b*) In Group B overt anxiety, hypochondriasis, hysterical symptoms, and obsessional symptoms were more frequent. All differences for these symptoms were significant.

Conduct Disorders. (*a*) There was little difference between one age level and another in Group A, although fire-setting, destructiveness and fighting were a little more frequent among the younger children. The proportions of stealing from the home and from outside were reversed as between the younger and older children, the former being more frequent in the younger. Older children could have a higher range of opportunities outside the home.

(*b*) Regarding the basis for selection in Group A, it is striking that apart from sexual misconduct, stealing was accompanied by most other conduct disorders, particularly lying.

SUMMARY OF SYMPTOMATOLOGICAL FINDINGS

Stealing over a period of one year was the criterion for inclusion in the group of children with conduct disorders; yet the majority showed most other conduct disorders and neurotic symptoms as well; the latter more frequent among the younger children, who appeared to be nearer clinically to those

classified as having neurotic disorders. However, in comparison with the children with neurotic disorders they were at all ages more often aggressive, with hyperactivity and with a higher incidence of disturbance in family and social relationships; pointing to an early differentiation in their personality traits towards aggression as opposed to timidity. The sources of these differences between the two groups must be sought in the etiology.

DISCUSSION

The psychiatric term 'conduct disorders' is similar to the term 'delinquent symptoms' used by Friedlander; it implies that the patient exhibits misconduct as an expression of emotional disturbance. Conduct disorders may be accompanied by such neurotic symptoms as disorders of function, as occurred in the majority of children examined here; when conduct disorders lead to trouble with the law the child may earn the title 'delinquent.' There is no hard and fast line between the emotionally disturbed young child, who gives a mixed picture of neurotic disturbance and bad behaviour, and the older delinquent child who perhaps shows little overt emotional disturbance. A psychiatric clinic can demonstrate children at all stages between one extreme and the other.

The results of analysis of these records of children who had been referred to hospital, are not wholly applicable to the average delinquent for whom psychiatric treatment is not sought, yet they give information on early instances of anti-social behaviour, which could not be gained from other sources. It was therefore important to compare the etiology and symptomatology of the younger children with older and more established delinquents who were also referred. It is possible that older delinquents seen in hospital, or perhaps others not so referred, would have presented a picture nearer to that of these younger children, had they been examined at an early age.

The etiology of delinquency has been described elsewhere from the social, psychiatric and other points of view. The etiology of these patients gives little new information from the psychiatric aspect, except that the presence of the father may be at least as important as the mother's for the emotional development of the child. Whether his influence is exerted mainly on the child direct, or exerted indirectly through his effect on the well-being of the mother, is not clear. It is evident, however, that a wide range of etiological factors should be examined and compared with normal controls. The effect of the war, for instance, which exerted a considerable influence on these children, could then more clearly be assessed in comparison with its effect on normal children.

It is of interest that no essential differences in frequency were found

in the etiological factors examined in conduct disorders between children below the age of eight, older non-Court cases, and Court cases. The numbers were small and this observation needs further confirmation. It seems, however, that more attention needs to be directed towards the quality of early parental and other influences on children with conduct disorders; in younger children where the history is more recent and its subtleties more easily determined, this might be enlightening.

Analysis of the symptoms shown by these children has revealed some interesting points, which could be further followed up. It demonstrated a wide range of symptoms under the headings—disorders of function, emotional attitudes, disturbed relationships, psycho-neurotic symptoms and disorders of conduct. An overlap mostly in disorders of function, was seen between those that occurred in essentially neurotic children on the one hand and the majority of those with conduct disorders on the other. Delinquent children not referred to a psychiatrist may show less overt neurotic symptoms and thus come at the end of this range. The more frequent incidence of neurotic symptoms in the youngest children with conduct disorders, pointed to less differentiation from the neurotic group at those ages. On the other hand, their emotional attitudes, with a tendency towards aggressiveness in those with conduct disorders and towards timidity and undue dependence in those with neurotic disorders, did not vary with age. It seems that such temperamental qualities were determined at an early age, and thus had come to contribute to the etiology.

SUMMARY

(1) The records of a group of 90 children with conduct disorders were compared with the records of a group of 70 children with neurotic disorders. Both groups were sub-divided according to age, and the group with conduct disorders according to whether charged in Court or not.

(2) A number of etiological factors were isolated and examined, and slight differences in their percentage frequency between older and younger children were demonstrated. No essential differences were found between Court and non-Court cases in those with conduct disorders. Some significant differences in the percentage of occurrence of certain factors were found between the two main groups, which appeared to be strongly associated with the subsequent development of conduct disorders on the one hand and of neurotic disorders on the other.

(3) Their symptoms were also examined. A majority of children with conduct disorders showed neurotic symptoms, whereas those classified as having neurotic disorders showed but few and mild conduct disorders. Differences in symptoms were noted according to age, there being less

differentiation between the two groups amongst the youngest children; temperamental qualities were, however, exceptional in showing early differentiation between the two groups.

TABLES

In the following tables the columns in heavy type show the percentages of occurrence of the given factor in the total groups A and B respectively. Within group A columns relating to non-Court cases are marked † and those relating to Court cases are marked ‡. Column P shows the statistical 'significance' at the percentage level indicated (·05, *i.e.*, 5% in Table I). When a statistic is said to be 'significant', *e.g.*, 'at the ·05 (*or* ·01 *or* ·0005) level', it is meant that the observed difference could arise by chance only in less than 5% (*or* 1% *or* 0·05%) of similar samples.

TABLE I

		TOTAL CONSTITUTIONAL FACTORS (in Percentages)										
		Group A CONDUCT DISORDERS					Group B NEUROTIC DISORDERS					
	No. of children	20†	20†	25‡	25‡	**90**	20	25	25	**70**		
	Age group	5–7 yrs.	8–11 yrs.	8–11 yrs.	12–15 yrs.	**5–15 yrs.**	5–7 yrs.	8–11 yrs.	12–15 yrs.	**5–15 yrs.**	A – B	P
FAMILY HISTORY	Psychoses	10	5	16	4	**8·9**	20	0	12	**10·0**	1·1	
	Epilepsy and psychopathy	35	20	28	8	**22·2**	10	4	20	**11·4**	10·8	·05
	Neuroses	35	60	24	16	**32·2**	40	44	44	**42·9**	−10·7	
	Physical disease	20	5	16	20	**15·6**	10	32	28	**24·3**	−8·7	
	Malnutrition	10	5	4	0	**4·4**	0	0	0	**0·0**	4·4	·05

TABLE II

	TOTAL SOCIAL FACTORS (in Percentages)										
	Group A CONDUCT DISORDERS					Group B NEUROTIC DISORDERS					
No. of Children	20†	20†	25‡	25‡	**90**	20	25	25	**70**		
Age group	5–7 yrs.	8–11 yrs.	8–11 yrs.	12–15 yrs.	**5–15 yrs.**	5–7 yrs.	8–11 yrs.	12–15 yrs.	**5–15 yrs.**	A – B	P
Relative Poverty	25	25	32	8	**22·2**	20	4	24	**15·7**	6·5	
Absolute poverty	20	10	0	16	**11·1**	0	0	8	**2·9**	8·2	·05
Relative overcrowding	30	10	8	16	**15·6**	5	0	8	**4·3**	11·3	·05
Absolute overcrowding	35	45	20	28	**31·1**	10	16	28	**18·6**	12·5	·05
Bad neighbourhood	35	0	24	12	**17·8**	5	0	0	**1·4**	16·4	·0005
Bad companions	35	25	32	40	**33·3**	0	0	0	**0·0**	33·3	·0005

TABLE III

		TOTAL PARENTAL ATTITUDES (in Percentages)										
		Group A CONDUCT DISORDERS					Group B NEUROTIC DISORDERS					
	No. of children	20†	20†	25‡	25‡	90	20	25	25	70		
	Age group	5–7 yrs.	8–11 yrs.	8–11 yrs.	12–15 yrs.	5–15 yrs.	5–7 yrs.	8–11 yrs.	12–15 yrs.	5–15 yrs.	A—B	P
MATERNAL	Lack before five years	60	60	40	28	**45·6**	10	24	12	**15·7**	29·9	·0005
	Lack after five	0	15	4	24	**11·1**	0	0	20	**7·1**	4·0	
	Lack through work	40	25	48	24	**34·4**	5	20	12	**12·9**	21·5	·01
	Over-solicitude	15	10	12	20	**14·4**	35	48	36	**40·0**	−25·6	·0005
	Under-solicitude	35	30	56	36	**40·0**	5	8	8	**7·1**	32·9	·0005
	Over-anxiety before present disorder	65	25	20	48	**38·9**	60	88	64	**71·4**	−32·5	·0005
	Over-anxiety with present disorder	90	60	36	52	**57·8**	70	92	64	**75·7**	−17·9	·0005
	Under-anxiety	0	10	8	8	**6·7**	0	0	0	**0·0**	6·7	·05
	Hostility before present disorder	25	15	12	12	**15·6**	10	4	8	**7·1**	8·5	
	Hostility with present disorder	50	55	36	28	**41·1**	15	4	16	**11·4**	29·7	·0005
	Over-restriction	15	40	12	16	**20·0**	15	32	4	**17·1**	2·9	
PATERNAL	Lack before five years	85	75	60	60	**68·9**	60	44	16	**38·6**	30·3	·0005
	Lack after five	15	5	24	40	**22·2**	20	12	40	**24·3**	−2·1	
	Lack through work	15	10	24	12	**15·6**	0	8	4	**4·3**	11·3	·05
	Over-solicitude	5	5	4	8	**5·6**	0	12	4	**5·7**	−0·1	
	Under-solicitude	25	10	24	24	**21·1**	0	16	16	**11·4**	9·7	
	Over-anxiety before present disorder	10	5	0	16	**7·8**	5	4	20	**10·0**	−2·2	
	Over-anxiety with present disorder	30	20	16	36	**25·6**	10	4	12	**8·6**	16·9	·01
	Under-anxiety	0	0	4	0	**1·1**	0	0	0	**0·0**	1·1	
	Hostility before present disorder	20	15	12	4	**12·2**	0	12	4	**5·7**	6·5	
	Hostility with present disorder	55	50	20	16	**33·3**	5	16	12	**11·4**	21·9	·01
	Over-restriction	40	55	20	20	**32·2**	30	28	24	**27·1**	5·1	

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TABLE IV

		TOTAL OTHER EMOTIONAL FACTORS (in Percentages)										
		Group A CONDUCT DISORDERS					Group B NEUROTIC DISORDERS					
	No. of children	20†	20†	25‡	25‡	90	20	25	25	70		
	Age group	5–7 yrs.	8–11 yrs.	8–11 yrs.	12–15 yrs.	5–15 yrs.	5–7 yrs.	8–11 yrs.	12–15 yrs.	5–15 yrs.	A – B	P
OTHER FAMILY INFLUENCES	Spoiling of the patient	5	10	40	8	**16·7**	5	4	20	**10·0**	6·7	
	Only child, etc.	15	20	44	32	**28·9**	60	24	52	**44·3**	15·4	·05
	Disturbed attitude of siblings.	5	0	12	24	**11·1**	5	8	4	**5·7**	5·4	
	Disturbing persons in home	35	35	32	20	**30·0**	20	28	32	**27·1**	2·9	
	Bad influences: home	45	40	32	44	**40·0**	30	16	20	**21·4**	18·6	·01
INFLUENCES ELSEWHERE	Bad influences: school	5	0	0	12	**4·4**	0	8	8	**5·7**	−1·3	
	Education: standard too high	15	25	40	48	**33·3**	25	28	40	**31·4**	1·9	
	Bad influences elsewhere	0	0	0	0	**0·0**	5	0	0	**1·4**	1·4	
	Psychological trauma.	15	15	8	4	**10·0**	20	40	48	**37·1**	27·1	·0005
	Evacuation alone before five	40	35	20	36	**32·2**	5	20	12	**12·9**	19·3	·01
	Evacuation alone after five	5	5	28	48	**23·3**	0	0	20	**7·1**	16·2	·01
	Evacuation with mother	15	20	32	24	**23·3**	15	20	24	**20·0**	3·3	

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TABLE V

		TOTAL SYMPTOMS (in Percentages)										
		Group A CONDUCT DISORDERS					Group B NEUROTIC DISORDERS					
	No. of children	20†	20†	25‡	25‡	90	20	25	25	70		
	Age group	5–7 yrs.	8–11 yrs.	8–11 yrs.	12–15 yrs.	5–15 yrs.	5–7 yrs.	8–11 yrs.	12–15 yrs.	5–15 yrs.	A–B	P
DISTURBANCES OF FUNCTION	Hyperactivity	65	55	56	24	**48·9**	40	44	20	**34·3**	14·6	·05
	Tics	20	0	0	4	**5·6**	20	32	12	**21·4**	−15·8	·01
	Stammering	25	5	16	4	**12·2**	15	20	8	**14·3**	−2·1	
	Food fads	35	5	16	8	**15·6**	20	40	24	**28·6**	−13·0	·05
	Encopresis	5	10	8	0	**5·6**	10	4	0	**4·3**	1·3	
	Enuresis	40	45	12	16	**26·7**	30	24	8	**20·0**	6·7	
	Disturbances of sleep	35	10	24	24	**23·3**	55	60	68	**61·4**	−38·1	·0005
	Gratification habits	10	25	12	8	**13·3**	20	24	8	**17·1**	−3·8	
	Tension habits	35	55	24	24	**33·3**	50	60	40	**50·0**	−16·7	·05
	Temper tantrums	55	40	32	32	**38·9**	30	48	40	**40·0**	−1·1	
EMOTIONAL ATTITUDES	Undue dependence	10	5	16	20	**13·3**	50	36	36	**40·0**	−26·7	·0005
	Timidity	25	15	24	20	**21·1**	65	64	56	**61·4**	−40·3	·0005
	Aggressiveness	40	35	28	24	**31·1**	0	8	12	**7·1**	24·0	·0005
DISTURBED RELATIONSHIPS	To mother	60	80	76	60	**68·9**	45	56	52	**51·4**	17·5	·05
	To father	55	55	36	40	**45·6**	10	24	32	**22·9**	22·7	·01
	To siblings	50	55	52	48	**51·1**	15	36	24	**25·7**	25·4	·01
	To school companions	80	70	44	44	**57·8**	25	36	40	**34·3**	23·5	·01
	To school and work	85	75	60	52	**66·7**	25	36	52	**38·6**	28·1	·0005
PSYCHO-NEUROTIC SYMPTOMS	Anxiety	35	20	28	36	**30·0**	100	88	88	**91·4**	−61·4	·0005
	Hysterical	0	0	0	0	**0·0**	0	0	20	**7·1**	−7·1	·01
	Obsessional	0	0	8	4	**3·3**	0	8	20	**10·0**	−6·7	·05
	Depression	0	0	4	8	**3·3**	0	0	20	**7·1**	−3·8	
	Ideas of reference	0	0	0	0	**0·0**	0	0	4	**1·4**	−1·4	
	Hypochondriasis	0	0	0	0	**0·0**	5	8	24	**12·9**	−12·9	·0005
CONDUCT DISORDERS	Stealing from home	90	100	72	52	**76·7**	0	0	0	**0·0**	76·7	·0005
	Stealing outside	85	60	76	84	**76·7**	0	0	0	**0·0**	76·7	·0005
	Lying	85	95	76	48	**74·4**	5	4	4	**4·3**	70·1	·0005
	Disobedience	60	65	56	44	**55·6**	15	24	16	**18·6**	37·0	·0005
	Truancy from home	35	25	64	36	**41·1**	0	0	0	**0·0**	41·1	·0005
	Truancy from school	45	45	32	52	**43·3**	0	8	8	**5·7**	37·5	·0005
	Destructiveness	50	30	32	8	**28·9**	5	0	0	**1·4**	27·5	·0005
	Fighting	45	40	16	12	**26·7**	0	0	0	**0·0**	26·7	·0005
	Sex misbehaviour	10	15	12	20	**14·4**	5	0	4	**2·9**	11·5	·01
	Fire-setting	30	5	4	4	**10·0**	0	0	0	**0·0**	10·0	·01

A PRELIMINARY SURVEY OF 300 FEMALE DELINQUENTS IN BORSTAL INSTITUTIONS[1]

P. EPPS (AYLESBURY)

INTRODUCTION

Work hitherto published on Juvenile Delinquency has dealt almost entirely with male offenders, presumably because females form only a small minority of delinquents. The daily average in Borstal Institutions in 1948 was composed of rather below 3,000 boys, and of 226 girls. Nevertheless, it seemed possible that this minority of roughly 8 per cent. might well be disproportionately important, and therefore worthy of study.

An attempt was made to survey girls committed to Borstal Institutions by the courts of England, Wales and N. Ireland during the period April, 1948, to August, 1950, numbering in all 330. Of these, 36 had to be omitted owing to absconding and inaccessibility. On the other hand, 6 were included who had been sentenced before April, 1948, but had undergone the greater part of their training during the given period, bringing the total to 300. Twenty-five were seen only once for a brief interview and intelligence testing; the remaining 275 were under daily observation during their training. In all cases, their families and past histories were checked with the official reports of the Police, Probation Officers and Approved Schools. The opinions of Governors and their staff concerning their behaviour were also sought. Follow-up data were obtained from the After-Care Association.

Unfortunately, no Social Worker was available for home visits, and no Psychologist for a battery of tests. Poverty of statistical verification is also to be regretted. The work attempted (in very inadequate spare time) is however offered like most correlations as a question-mark to, not a causal explanation of, delinquency, and it is hoped that it will serve as a guide to further investigation.

SURVEY OF FACTS

(1) *Age on Reception*.

The age period now liable for sentence to Borstal Training is 16 to 21 years, but prior to 1948 was from 16 to 23. Of our cases, 19 were aged 16 on reception, 68 were 17, 74 were 18, 74 were 19, 54 were 20, 8 were 21, 2 were 22 and 1 was 23. The average age was 18·8 years.

[1] I am indebted to the Prison Commissioners for permission to publish this article, which does not necessarily represent their views.

(2) *Offences*

Offences against property numbered 182 (134 larceny and 48 housebreaking, 4 of which were with violence). Offences against discipline numbered 101 (50 for breach of recognizance and 51 for absconding from an Approved School). Offences against the person were 5 (malicious wounding 2, assault 1, administering poison 1, neglect of child 1). The remaining 12 were miscellaneous: 3 for false pretences, 3 for drunkenness, 5 for wandering abroad, and 1 for loitering. The remaining 9 may be considered sexual offences, but do not afford an accurate estimate, since such offenders are commonly charged with other non-sexual offences.

The great majority of girls (274) had made from 1 to 6 appearances in court, previous to the charge for which Borstal Training was given, 2 having 10 and 13 such appearances. Twenty-six had no charge against them, being 'care and protection' or 'beyond control' cases, whose misbehaviour at Approved School or Remand Home had caused their transfer to a Borstal Institution.

(3) *Previous Sentences*

Eleven had received no previous sentence, but presumably had been given Borstal Training because of the serious nature of their first offence (8 housebreaking, 1 of which was with violence, 1 administering poison, 1 false pretences and larceny, and 1 larceny). The remaining 289 had received sentences as follows:

56 Approved School only.
95 Probation only.
4 Prison only.
1 Fine only.
72 Approved School and Probation.
3 „ „ „ Prison.
2 „ „ „ Fine.
21 Probation and Prison.
18 „ „ Fine.
9 Approved School and Probation and Prison.
4 „ „ „ „ „ Fine.
1 „ „ „ Prison and Borstal Detention.
1 „ „ „ „ „ Probation and Fine.
2 Probation and Prison and Fine.

It is to be remarked that 41 girls had received prison sentences, 5 of them having served 2 sentences. It was not possible to ascertain the length of each sentence, but 6, at least, were of 6 months' duration, and 1 for 1 year.

The remaining were from 2 weeks to 6 months. The practice of sentencing young people to Prison has been deprecated by the Prison Commissioners in their annual reports.

(4) *Family History*

(*a*) *Parental Situation.* In 197 cases, the girls had homes containing both parents, but 103 of these homes were rated as unsatisfactory, mainly because of parental friction, illness, or economic difficulties, often resulting in the transfer of the child to relatives for varying periods.

In 92 cases, the home was broken (by death in 16, and by separation or divorce in 76). Twenty-seven had spent part, or all, of their childhood in Institutions, and 17 had had foster-parents. This gives a rather higher figure for deprived homes (68·6 per cent.) than in some studies. J. H. Bagot found 41–44 per cent. for boys and 49–56 per cent. for girls. Carr Saunders and others found the attitude of parents normal in 54·6 per cent. of delinquents and in 83 per cent. of controls.

(*b*) *Siblings.* Only children numbered 40 (13·3 per cent.), but of these 20 had step-sibs and 3 had foster-sibs. Eldest children numbered 65 (21·6 per cent.) and youngest 85 (28·6 per cent.). Families of less than 5 children were 165, those with 5 or more were 135. If step-sibs are included, 23 pass into the group with larger families, making 158. These figures retain much the same relative proportions as those given by East, who states that 8·8 per cent. of Borstal boys were only children, 17·7 per cent. were eldest, and 20 per cent. were youngest. He concludes that the position in the family is not a crimogenic factor, and that the size of family was larger than in a random sample.

(*c*) *Illegitimacy.* Thirty girls were illegitimate.

(*d*) *Disease.* A history of psychosis was found in 13 cases (4·3 per cent.; 9 in parents or grandparents, 4 in aunts or uncles). Mental deficiency occurred 6 times (2 per cent.; 1 aunt and 5 siblings). Low intelligence appeared in 7 other cases (2·3 per cent.; 4 in parents, 3 in silbings). Neurosis occurred 26 times (8·6 per cent.; 24 parents and 2 siblings). Epilepsy was found 6 times (2 per cent.; 5 siblings and 1 parent). Alcoholism was said to be present 28 times (9·3 per cent.; 27 parents and 1 sibling). It should be noted however that only the visit of a trained Social Worker to the home would justify one in drawing conclusions. East's corresponding figures were psychosis 6·4 per cent., mental deficiency and sub-normality 4·1 per cent., neurosis 2 per cent., epilepsy 4·8 per cent., alcoholism 5·2 per cent.

(*e*) *Delinquency.* In no less than 86 cases, a history of delinquency in the family was found. A prison sentence had been given in 34 cases

(both parents 4, mother 5, father 8, husband 2, brothers 14, aunt 1). In an additional 3 cases, the mother had been charged with neglect of children. The remaining 49 girls had, in the main, siblings who had received less severe sentences, Approved School, Borstal or Probation. This rate of 86 (28·6 per cent.) is considerably higher than that given by East (5·2 per cent.), possibly because of the general post-war rise in crime. This problem of the delinquent family needs to be stressed. Bagot finds that such occurs in 39·4 per cent. of recidivists; Stott also comments on it.

(5) *School Record*

Two hundred and sixty girls attended elementary schools; the remaining 40 went for part of their schooling to secondary, commercial or technical schools. An attempt was made to assess the record by regarding as ' satisfactory ' those who reached the top class, or the class judged as such for the age at which they left; a failure to reach this standard was judged unsatisfactory. This gave the figure of 150 as satisfactory, including 23 in the group receiving higher education, but its accuracy may be doubtful without more objective evidence. Truancy figured somewhat prominently in the histories, an early sign of difficulty in adjusting to the environment, which seldom led to investigation of the cause at a Child Guidance Clinic. Ex-Approved School girls amounted to 148 (49·3 per cent.), a much higher proportion than the 9 per cent. of ex-Home Office School boys among the 4,000 Borstal lads reviewed by East.

(6) *Work Record*

Fifteen had no work record, mainly because they had come from Approved Schools to Borstal Institutions. All the rest had done unskilled work, with the exception of 12 (2 shorthand typists, 6 typists, 2 clerks, 1 telephonist, 1 laboratory assistant). Work commonly consisted of unskilled occupations in factory or shop. Eighty-six had had more than 6 jobs, according to the police records, but this number would have been higher if the frequent custom of leaving a few hours after starting had been entered on their records. As expected, this work record compares unfavourably with the figures quoted by Reed, namely an average of 2·53 jobs for each girl of 18, and 2·34 at 19 years of age, in the group of those leaving school at 14.

(7) *Physical State*

(*a*) *Height and Weight.* The average height was 5 ft. 2·7 in., and the average weight, excluding pregnant girls, was 129 lb., on reception.

(*b*) *Physical Defect.* The general impression on admission was of a group of well-developed and physically healthy girls, and this was confirmed

by the height and weight recorded above. Thirty-one were judged to be, or to have been, handicapped, as follows: squint 3, marked deformities of feet 3, asthma 3, tuberculous adenitis 2, endocrine dyscrasia 2, psoriasis 2, varicose veins 2, and 1 each of epilepsy, chronic otitis media, thyrotoxicosis, anterior poliomyelitis, iritis, interstitial keratitis, acne, facial palsy, pulmonary tuberculosis, tuberculous spine, petit mal, disseminated sclerosis, rheumatic fever, ulcerative colitis.

(*c*) *Menstrual Function.* The age of onset was not recorded in 14 cases; in the remaining 286, it averaged 13·74 years. The mean age for the south of England is given as 13·49 years (Wilson and Sutherland). The suggestion of Burt that female delinquents are 'over-sexed' would not seem to be associated with an earlier menarche. The menses were irregular in 41 cases.

(*d*) *V.D. Rate.* Eighty-six (28·6 per cent.) girls had treatment for gonorrhœa (3 twice re-infected). Forty-four (14·6 per cent.) were treated for syphilis, 19 had a double infection. East gives the figure of 0·5 per cent. for gonorrhœa at the age of 16–17, and 2·1 per cent. at 20 in his (pre-war) study of Borstal boys.

(8) *Social Status*

(*a*) *Marital State.* Twenty had been married, of whom 14 were afterwards separated or divorced. The husbands of 2 of the 6 still married were in prison, and a third had received a Borstal sentence at the same time as his wife.

(*b*) *Pregnancies.* Fifty-nine girls had 67 pregnancies, 8 girls having 2 pregnancies each. These pregnancies resulted in 13 miscarriages, 7 legitimate births and 47 illegitimate births. The pregnancies of syphilitic girls resulted in 8 babies and 1 miscarriage. Four of these babies were born while the mothers were in training; they progressed well, showing no evidence of congenital syphilis; the remaining 4 were said to be well, but were not examined.

Attitude to sex varied from continence to professional prostitution, the majority having had considerable promiscuous experience. The line between pre-marital intercourse and amateur prostitution is an indefinite one and exact figures cannot be given, but it is probable that 45 of the 300 had not had intercourse, and 102 could be regarded as prostitutes, although only 3 regarded themselves as professional prostitutes. From the viewpoint of V.D. and illegitimacy rates, these amateur prostitutes are probably a greater liability to the community than the professionals.

It should be noted that this type of offence (prostitution) is on the increase. Criminal statistics for 1949 record 5,766 cases, 6 per cent. of those found guilty being under 21.

(9) *Mental State*

(*a*) *Intelligence.* The Progressive Matrices Test was given individually to each girl, but it was only possible to test 289 girls. The largest group (144) fell within average limits (Grade 3). A large group (134) were of subnormal, and 11 of superior intelligence (Grade 2). The average score obtained was 34·87, which is below the lower limit of average intelligence. It is also lower than that obtained by Stott, who, using the same test on 102 Approved School boys, found an average of 40. It has been established by numerous observers that the intelligence of the average delinquent is less than that of the average non-delinquent (Pearce, Guttmacher).

A group of 102 girls who were prostitutes followed the same pattern of intelligence grade as the whole group (50 of average, 48 of inferior and 4 of superior intelligence), suggesting that psychological factors are more important in the causation of prostitution than the economic factor, e.g. the handicap of low intelligence at work.

(*b*) *Neurotic Symptoms.* Eighty-one had neurotic symptoms in childhood (enuresis, sleepwalking, temper-tantrums, various fears, etc.). Of these, 40 retained them in adolescence. Together with 23 others who developed them for the first time in adolescence, a total of 63 girls presented neurotic sumptoms while under observation. The main manifestations were those of hysteria (31), anxiety (19), depression (7), and schizoid reactions (6).

(*c*) *Emotional Instability.* This was sufficiently marked to produce anxiety, particularly in relation to disciplinary problems, in 83 girls. In 43, it was accompanied by subnormal intelligence, in 7 by pre-psychotic symptoms, and in 26 by neurotic symptoms. Twenty-six were of average intelligence with neither neurotic nor pre-psychotic symptoms. The term ' psychopath ' tended to appear in accompanying medical reports, sometimes without due allowance being made for a delay in maturation. Since the days of Lombroso immaturity has been noted by numerous observers, e.g. Abrahamson, to be a common characteristic of criminals. It was particularly noticeable in this as in the prostitute group (noted also by Wittkower and Cowan in their study of sexually promiscuous service-men). Further work in the more exact assessment of immaturity, by the development of Social Maturity Tests, and their comparison with the histories and follow-up of the cases, is needed before the most helpful conditions for assisting maturation during training can be established.

(*d*) *Psychological Treatment.* A psychiatrist's opinion had been sought in 38 cases. Out-patient treatment was given to 19 (7 at Child Guidance Clinics, 1 at a special residential school, 4 at psychiatric O-P Clinics,

1 treated privately by a psychiatrist, and 6 temporarily transferred to Holloway for psychotherapy during training).

Twenty were admitted to mental institutions, 6 of these spending only 1 or 2 weeks in an observation ward. Of the remaining 14, 9 were voluntary patients in mental hospitals. One was first a voluntary and, later, a certified patient (adolescent instability with hysterical symptoms) previous to her period of training, and has remained relatively stable so far. The remaining 4 were certified after reception and transferred to mental hospitals as cases of schizophrenia.

(10) *Follow-up Data*

Time, so far, allows of only a limited follow-up. The sentences, in 3 cases, have been commuted to imprisonment; in each case (1 sexual and 2 aggressive psychopaths) their behaviour was very upsetting to the rest of the community. Four girls, being certified as insane, were transferred to mental hospitals for treatment. One, with a recurrence of ulcerative colitis, was transferred to a general hospital, where later she died.

Of the first 50 released under supervision, having completed a training period averaging 19·3 months, 14 have, so far, been recalled for further training, the Probation Officer having reported unsatisfactory behaviour. In addition, 1 girl was charged with housebreaking, for which she was bound over, with a condition of residence. We have, therefore, a provisional figure of 30 per cent. unsatisfactory results, but little can be deduced so far, since the number of returns is small, and the period of supervision not yet complete.

DISCUSSION

The present study deals with a specialized group of delinquents, characterized by age period, sex and in most cases the chronicity of the delinquency. Although criminality tends to decline as the delinquent becomes adult (Glueck, Abel and Kinder), a fact which is usually attributed to maturation, yet the recidivist's criminal career usually dates from adolescence, so that both the preventive and curative aspects of treatment in this important group need to be considered.

The connection between unhappy home relationships and delinquency is noted by numerous observers, and the present study falls into line with others, only 31·3 per cent. homes being classed as satisfactory. Theories vary as to the relative importance of different factors in the social development of the child, whether it is separation from the mother-figure in the first five years of life (Bowlby), or a poor relationship with the first important disciplinary agent, usually the father (Guttmacher). However many, or

however varied the theories brought forward to account for anti-social behaviour, it is clear that in practice each delinquent needs to be studied in detail, so that the causes can be accurately diagnosed, and the right treatment prescribed. Furthermore, the high rate of family delinquency (28·6 per cent.) suggests the advisability of tactful enquiry in the home, by a trained Social Worker, with a view to preventive treatment of other, probably younger, members of the family.

Having conceded the need to consider each delinquent individually, the importance of an Allocation Centre becomes obvious. Here each entrant for Borstal Training can be assessed from all angles, including the psychological and psychiatric viewpoints, over a period of some 4 to 6 weeks. This should permit correct classification and allocation to an appropriate training centre. Contamination is an ever-present problem, and, in this series, would affect a larger number than the 8·6 per cent. who had not been charged with an offence. Its danger can undoubtedly be reduced by suitable allocation (Maxwell), which is of even greater importance in the case of a girl than that of a boy; not only can she learn more of acquisitive crime from her more experienced fellow-trainees, but she can learn more of sexual deviations. Sex, sport and crime, in that order, form 74 per cent. of the main subjects of conversation in Boys' Borstals (Leitch), and certainly sex and crime appear to be the most popular topics among girls.

Not only are the personalities and experiences of those forming a group important, but its size also needs consideration. A small group, at the most 50, allows some individual attention, an improved atmosphere, and training, domestic or otherwise, such as will be of greater use to the girl, than can be given in the kitchen, etc., of a larger Institution. This is attained at the ' open ' Borstal, where the trainees are unhindered by bolts and bars, and can learn more easily to adjust themselves, both as individuals and as a community, in a more natural and realistic way. When circumstances allow the opening of other establishments, mostly on ' open ' or ' semi-open ' lines, with perhaps one that is ' closed ' for the more irrepressible absconders, the problem of contamination will begin to be overcome.

Emotional instability, noted in a marked degree in 27·6 per cent. of this series, is almost as big a problem as contamination. It appears to lead to two types of difficult behaviour. The first is concerned with the aggressive drive. On the one hand it may be directed outwards, and manifest itself by an outburst in which windows and furniture are smashed, or, on the other, it may be directed against the self, as, for example, in the production of self-inflicted scratches, usually at the height of an outburst of temper. Both may assume minor epidemic form, when girls try to out-smash and out-scratch one another. Low intelligence and a hysterical element in the

personality are often found in conjunction with this excessive aggression, but by no means always so. It was also found in those of normal intelligence and without neurotic features, the resultant conflict being 'acted out', rather than repressed to produce neurosis.

The second type of difficult behaviour, found particularly in unstable cases, is concerned with the sexual drive. True homosexuality seldom presents itself as a problem in this age group, but bisexuality, or a regression to the adolescent homosexual phase, due to the exclusively female environment, leads, in the unstable, to somewhat unhealthy erotic behaviour.

The problem presented by this emotional instability, can be considerably diminished by a less repressive regime, as in an 'open' or 'semi-open' Institution, where difficulties of social adaptation assume less exaggerated forms. In addition, the question of psychotherapy arises. In cases of low intelligence, little treatment is indicated other than explanation and reassurance. This is best given at private interviews from the onset of training, when the girl is given sufficient time to unburden herself of her problems. But more intensive therapy is needed in some cases, where intelligence, insight and co-operation allow, in which case the timing of treatment requires consideration. In some cases, the urgency of symptoms may indicate immediate treatment, but frequently the girl's attitude during the first few months is not propitious. During this period, a full programme of constructive work, together with educational classes, is of greater value. In this way time is allowed for resentment over her sentence to cool and confidence to be won. On the other hand, treatment should not be delayed until the too-near approach of her discharge produces other conflicts and attitudes.

It would appear that this adolescent group needs more treatment than the average prison population. Twenty-one per cent. had neurotic symptoms, and in addition to these, cases with psychopathic features, character and personality deviations, etc., would be helped by treatment. The figure for the general prison population is 5-15 per cent. (Young). An opening for group therapy therefore presents itself, and this, combined where necessary with individual treatment, could well be given in one particular establishment, where, psychotherapy being the accepted treatment for all, the singling out of certain girls, which is liable to lead to difficulties, would be avoided. The treatment would, of course, be combined with the usual occupational and educational training. This would necessitate a certain elasticity of transfer from one establishment to another, and would have the additional advantage that those confined at first to a 'closed' establishment, might be thought later to be suitable for treatment, and so

be able to avoid the abrupt transition from a disciplined life to life in the normal community.

In addition to the unstable individuals, certain others require special consideration. There is the problem of the ever-model inmate, who always and repeatedly lapses on discharge, a problem found also at a later age in prison. Such cases appear to have inadequate and immature personalities, needing the support of a disciplined regime; they admit they are thankful to exchange the advantages and responsibilities of life at an ' open ' Borstal, from which they usually abscond, for the sheltered and disciplined life at a ' closed ' Institution. Although it is said that the mental and physical changes that normally occur at maturation are helped by a good heredity and environment, and impeded by poor intelligence and personality (Glueck), more exact knowledge of this bio-social process is needed. At present, it is doubtful if we provide conditions of training which will assist maturation, but it would seem possible that these immature inadequates would be helped by a gradual change from a sheltered to a more responsible way of life, and by the greater opportunities for social adaptation allowed in the more ' open ' type of Borstal.

A second type of difficult personality is that of the ' lone wolf ', who usually adjusts with great difficulty to community life. Here a stunted emotional development, possibly associated with a deprived childhood, results in an ' affectionless ' state, resulting in a schizoid attitude. This is usually taken, in the case of males, to be ominously suggestive that the chronic and worst type of criminal may result; whether this applies to females is uncertain. Extramural treatment, e.g. Probation, suits this type better, if a reasonably good environment is available. But if this has been tried without success, as little regimentation as is possible in an institutionalized life is advisable. This raises again the need for small groups and a minimum of repressive handling, also the importance of early diagnosis of this personality trend, so that this type of delinquent may be singled out for more intensive investigation and treatment.

SUMMARY

(1) A brief medico-psychological survey of 300 female adolescent delinquents in Borstal Institutions is presented. Although comparatively small, the group is thought to be important in certain respects. The V.D. rate was 111 (37 per cent.). Approximately 34 per cent. had some experience of prostitution; 19·6 per cent. had one or more pregnancies. The high rate of ex-Approved School girls is unexpected.

(2) The insecure home background, repeatedly found in studies of delinquency, again presented itself; and the occurrence of ' delinquent

families ' calls for social work from the preventive angle.

(3) The Borstal entrant has usually had either a prolonged, or a serious, delinquent career, and needs careful individual investigation, such as would be available at a well-equipped Allocation Centre, in order that the correct factors in training and treatment may be provided.

(4) The danger of contamination among females is as great as, if not greater, than among males of this age group. It can be reduced by careful allocation to the appropriate establishment, which preferably should be small, i.e. for 50 or under.

(5) It is suggested that unstable behaviour, both aggressive and sexual, is reduced where the minimum of repressive control is exercised, as in Borstals of the ' open ' and ' semi-open ' types.

(6) The incidence of neurotic symptoms was 21 per cent.: besides these girls with psychopathic traits, character and personality defects, etc., also need psychotherapy. The conditions for carrying this out are discussed. Temporary transfer of selected trainees to one particular establishment, where these facilities are available, is suggested.

(7) The treatment of certain immature and schizoid personalities is discussed.

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UNCONSCIOUS MOTIVES FOR THEFT[1]

By HANS ZULLIGER (Ittigen-Bern)

As early as 1919, at a conference of the Swiss Psychiatric Society, Kielholz convincingly argued that certain forms of theft are not motivated solely by acquisitiveness but have a symbolic meaning (1). He demonstrated by three examples that theft is sometimes resorted to for the purpose of attaining a sexual object in symbolic form. The delinquents described by Kielholz were adult men and women. I should like to show from a child-guidance case that symbolic theft can also be committed by children or adolescents and has sometimes a significance other than 'sexual' in the popular meaning of the word.

Doris F., aged sixteen, attended a technical school for backward girls. She was considered an 'average' pupil and suffered from slight debility. She was said to be a good cook, clever at needlework and outstandingly good with small children. With girls of her own age she was reserved, somewhat timid and silent. Educationally she had never given any trouble and was considered a pleasant pupil, until suddenly it emerged that Doris had committed several petty thefts. A fellow pupil missed a blue pencil. She reported this and the teacher, on going through the property of the girls, found the pencil in Doris's satchel. When questioned the girl at first denied, but finally admitted having stolen various articles from other pupils and even from the form mistress: a pretty handkerchief from one girl, a notebook from another, a small pair of scissors from a third; and from the teacher a bunch of keys. Under pressure she confessed that she had taken two francs from another girl's purse.

The theft of money had happened some time previously and the teacher had suspected another girl, Sabine. She had kept her back in the form room and when Sabine had stubbornly refused to own up the teacher had taken her home with her to coax her, but without success. Sabine afterwards told her classmates that the form mistress had treated her to tea and cakes and had been very kind to her, trying to make her confess. She had failed in this object however because, declared Sabine, she had not, in fact, committed the theft.

There had also been earlier instances of small sums disappearing in class, and after persuading Doris to admit the theft of the 2 francs, the teacher succeeded in making her confess that she was responsible for these thefts too. It was thought that the black sheep had at last been found. Doris was

[1] Translated by Gerta Balg.

summoned before the assembled teachers and once again admitted her misdeeds, shedding copious tears. When she left, the staff discussed what measures should be taken. The form mistress proposed expulsion as a deterrent. The principal, however, taking into account the fact that Doris had hitherto given no trouble, suggested letting her off with a warning and keeping her under observation. Finally a compromise was reached: the girl was to stay away from school for a week, she was to be put under psychological observation and be given expert advice.

The first report I received came from the form mistress. She was indignant about Doris's preliminary stubborn denials and the 'artful' manner in which she had disposed of the stolen goods. She had hidden the blue pencil inside the back of a book, burnt the handkerchief and the notebook, thrown the scissors into the river and dropped the keys in the school lavatory. The money, she declared, she had not spent on sweets but scattered in a meadow on her way home in order to avert suspicion. In the opinion of the form mistress 'all these thefts were caused by mischievousness and ill-will. The stolen articles were of no use to Doris. She couldn't have used the keys anyway, unless she was planning to commit burglary in my flat.' It was obvious that the teacher felt personally insulted, a state of mind not conducive to disinterestedness and an objective choice of educational measures. However, for the time being nothing could overcome her emotional bias.

Doris was a girl of pyknic habit. Her broad face expressed worry and she seemed older than her years. It took some time to make Doris talk, although no mention was made of her delinquency. To overcome her self-consciousness before starting my intended psychological tests, I discussed holiday plans with her in the hope of drawing from her memories of former holidays. Gradually she ceased replying 'yes' and 'no'; she began to form sentences and ended by making connected statements. Her confidence increased, she realized that the situation was not 'so dangerous' and she began to expand.

Only after such careful preparations did I ask her to submit to various tests and she agreed. As most children and adolescents like drawing, we began with the Baum (tree) test (2), then came the Wartegg test (3) [2] —with coloured pencils. While handling the pencils Doris had time to get used to the room and the supervisor, to lose her shyness and, as a result, to behave as naturally and unselfconsciously as possible during the form-interpretation tests (4) which were to serve as a basis for the investigation. Unless such a frame of mind is attained the results of this test are invalidated. It is essential

[2] A projection test based on 'form completion' widely used in German-speaking countries.—[ED.]

and well worth the trouble to prepare juveniles for tests with much care and patience, allowing plenty of time. Moreover, I consider it important for children and adolescents to give their consent freely to the experiments and so avoid secret resistance.[3]

In Doris's case the results of the tests tallied. They showed mental debility. Also the stealing syndrome was confirmed by the form-interpretation tests (5).[4] These revealed nothing more startling than that Doris in describing sections of pictures showing parts of a figure, named instead the whole figure, e.g. where others would have said ' the head of a man ', Doris replied ' this is a man '. Although only the head of a crocodile was shown Doris declared she had seen a whole crocodile, etc.

At the conclusion of the experiment Doris was asked if her answers ' man ', ' crocodile ', etc., were to be taken literally, whether she had actually ' seen ' the whole shape or only the respective parts or ' heads ' of the named figures. Children tend to name a whole figure even when they have only seen a part of it; as a rule, however, they admit having meant only the part, i.e. the man's *head*, the crocodile's *head*, etc.; the naming of the whole figure may be due to a certain negligence or lack of precise expression. Doris, however, declared she had actually seen the complete figures, ' You don't see the arms and legs, but they are there, somewhere ', she said. Her phantasy supplemented the missing parts of the bodies and she behaved according to the primitive-infantile law *pars pro toto*, so familiar to us through Freud's psychology of dreams. It will be seen presently that this result of Doris's tests is of particular significance.

Not until the tests were completed did we broach the subject of her thefts. I had intentionally avoided it up till now as I expected this topic might upset her. Even a fleeting change of mood would have influenced or falsified the results of the test, and that was to be avoided.

Doris, in committing her thefts, had followed an impulse ' which came over me suddenly '. She admitted having taken the blue pencil, the handkerchief, the notebook, the scissors and the bunch of keys and described in detail how she had done it. As for the two francs and the other money, she declared she had not stolen it. When asked why she had told her teacher and the assembled staff that she had stolen the money she awkwardly shrugged her shoulders and remarked: ' It was all the same. I didn't care.

[3] It is sometimes necessary to promise and to give children and adolescents a small reward, e.g. some fruit, lemonade or even a small sum of money. They must somehow or other be made to take an interest in the test.

[4] Form-interpretation tests consist in the interpretation of chance shapes or figures. The answers are grouped according to a definite scheme, the point being to establish how many interpretations refer to a whole, to detail, shape, colour or reveal kinæsthetic influence, etc. The factors and ratios thus obtained justify psychodiagnostic conclusions of a rather subtle nature.

I thought I should be punished anyway. I was ashamed and only wished the cross-examination would come to an end soon. I thought if I admitted having stolen the money as well they would let me go, and so they did.'

'You need not answer if you don't wish to,' I commented, 'but I would like to ask you whether you have really never stolen any money.'

'Yes, I have', she admitted, blushing. 'From Mother. About a penny or threepence. But that was a long time ago. To buy something for myself. An orange, chocolate, a sweet. But that was years ago and I had a bad conscience and told mother. She didn't punish me because I owned up. She said she would forgive me provided I never stole again. And she gave me a nice apple—that very day!'

As Doris readily confessed her early thefts it seemed likely that if she had really stolen money in school she would have admitted that too. Her self-accusation in the presence of her form mistress and the assembled staff was untrue and was only made to escape from the painful investigation. Confirmation of this reached me while I was discussing matters with Doris. The headmistress rang me up to tell me that Sabine had confessed it was she who had stolen the two francs and the other money. She did not want her schoolfellow Doris to be punished for a theft she had not committed.

Like most children Doris considered stealing money a far more serious offence than taking some object, even if it was of greater value than a small coin. The same affective reaction is shown by many adults, who are far more alarmed when a child takes a threepenny bit than a toy, a utensil, food or sweets, etc. They have a special attitude to money; it means for them something almost sacrosanct—the essence of 'property' as a part of themselves. Doris went on explaining: 'It was as if somebody had told me to take the things. I was very frightened afterwards. That is why I burnt or hid the things in places where nobody could find them!' Doris, incidentally, had a particular affection for all those from whom she had stolen things, but she was too inhibited to come into close touch with them. 'Other girls make friends so easily', she said wistfully. 'Our form mistress, too, likes others better than me; I can see it.'

From Doris's mother I received the following report: there was no other case of mental deficiency in the family. Doris was the eldest child, her birth had taken three days, and instruments had to be used. When the doctor arrived it was too late for a Cæsarian section. After her birth the girl's life hung in the balance for a while, she had probably had a cerebral hæmorrhage which may have caused her debility. Her mother had been a teacher, her father was a higher grade civil servant. The father's parents were respectable shopkeepers, the mother's came from artisan stock. No

member of either family suffered from any mental disorder, nor were there any cases of delinquency, alcoholism or venereal disease.

Doris, she continued, was still very childish and sometimes played secretly with her younger sister's dolls. Owing to her lack of intelligence she had always been a lonely child. She had no girl friends. She was much attached to her mother. On one occasion, when her mother was away on holiday, Doris could only be comforted by being given a handbag of hers to take to bed with her. This incident—which was only casually mentioned—turned out to be nothing less than *the key to the girl's thefts*. The handbag was a substitute for her mother. Here again we meet the primitive, childish reaction *Pars pro toto*. Something belonging to her mother represented for Doris, or rather for her unconscious, her mother herself.

Doris loved those from whom she had stolen things, her form mistress and her classmates. At the same time she realized she was ignored by them or treated with very little affection and that she could not win their friendship. So she stole some of their belongings. The theft was committed under a peculiar compulsion perplexing to herself. She was unaware of the symbolism of her actions when she unconsciously identified the stolen things with their owners whom she loved. She stole out of a need of affection and friendship. The stolen goods were for Doris substitutes for loved people. Just as she behaved in the form-interpretation test where she took parts for the whole, so she had behaved in other circumstances and in another place, acquiring a part in the belief that she was thereby in possession of the whole. Her defective mind had remained in the magic stage of mental development where the part is taken for the whole and property for persons.

The explorer Heinrich Hintermann (6), who recently visited unknown Indian tribes on the River Xingu (a tributary of the Amazon), told me that the Kamayuras anxiously avoid leaving hair or nail parings about in the belief that whoever finds and destroys them might kill the persons to whom they belong. He had had the greatest difficulty in persuading the natives to sell him any ornaments or implements as they believed those things could be used for ' evil magic '. Similar views are said to be held in other parts of the globe, e.g. in India, Africa, Kamchatka and Oceania. In fact, the law *Pars pro toto* seems to prevail everywhere among primitive people. It is a long time since attention was first drawn to the parallel existing between the development of the child and racial development. Primitive man thinks like a child; so does the primitive individual in a civilized society. So does Doris, although she is almost grown up. Her unconscious follows the same lines.

To prevent Doris from further stealing, the following suggestions were

made to the Head of the school and the form mistress in the presence of the girl's mother:

(1) Doris was not to be expelled; she was, however, to compensate those from whom she had stolen by some small services. The form mistress, who had become more reasonable and was feeling pangs of conscience for having considered the girl ' more wicked ' than she actually was, expressed her willingness to follow the educational expert's advice and graciously agreed to take Doris back into her class. She was anxious to give her more attention and kindliness in future. Both the teacher and the headmistress promised to speak to the girls whose things she had stolen and to persuade them to be friendlier with Doris. The main thing was to give her more affection. The teacher was willing to invite Doris to a meal every now and then, without the necessity of ' cross-examining ' her as she had done with Sabine.

(2) Doris's mother agreed to do what she had never done before, namely, to give her daughter some weekly pocket money, and not ask her how she spent it.

The purpose of this educational plan was not so much to criticize Doris's shortcomings as to encourage her and praise her for any achievements such as cooking, needlework, nursery activities, etc. Through the attitude of those around her, her self-respect was to be raised and her sense of loneliness alleviated. In fact, Doris's behaviour after her return to school was irreproachable. On leaving school she moved to another town and became nursemaid in a family known to her mother. She has been there now for a year and has proved her worth. She has not stolen again.

Her case reveals the following points:

(1) A child or a childish adolescent can, under certain circumstances, steal from motives other than greed or ill-will. *Theft can have a symbolic character.*

(2) If this kind of theft is punished by ordinary methods of retribution or expiation, *the delinquent is driven still further into inner isolation and fear of life: the unconscious motive for theft becomes more powerful* instead of being subdued or dissolved.

(3) In the case of all children and adolescents who have stolen, it is fundamentally wrong to mete out punishment as a deterrent. What is needed is a most *thorough investigation founded on psychological principles.* Subjective, rather than objective, evidence must be examined and educational measures evolved that fit each individual case. All summary investigations, measures and punishments are inadequate and instead of making the child feel secure only outrage its *sense of justice.*

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Our present handling of the sex offender is an ineffectual one, compounded of ignorance, prejudice, emotion and fear. Our present penal treatment worsens the offender rather than improving him, and the criminal law, whose job it is to protect the community, finds itself, in fact, contributing to delinquency. Clearly, again, this reverse process must be promptly checked.

From the Interim Report, Committee on the Sex Offender, Canadian Penal Association, Toronto, 1948, p. 29.

We have created a vast network of official agencies to bring offenders to justice to determine their guilt, to impose penalties, and to administer penal or correctional treatment. The operation of these agencies, the manner in which they apply policies dictated by law, and their relations to offenders in their charge are phenomena concerning which we are poorly informed. Some of the problems involved have been laid bare by various local and state surveys of criminal justice or by piecemeal research, but what is needed as a basis for administrative improvements is a permanent system of social accounting in this field. The statistical analysis of administrative processes offers the soundest basis for administrative reform. Archaic and ineffective methods of dealing with offenders would have less chance of survival in law and practice had their nature and operation been the object of continuous statistical scrutiny.

THORSTEN SELLIN: *Journal of Criminal Law and Criminology*, Vol. 40, 1950, p. 680 (quoted by permission).

CURRENT RESEARCH

(*Continued from No.* 2, *p.* 134.)

VII. Follow-up Study of Borstal Boys

(1) *Name of University Department supplying the information:* Delegacy for Social Training, University of Oxford.

(2) *Subject of Research:* A follow-up study of 500 Borstal Boys.

(3) *Under whose auspices is the research being carried out?:* Delegacy for Social Training under the general academic supervision of Dr. M. Grünhut, Lecturer in Criminology, University of Oxford.

Research Worker: Mr. A. G. Rose, B.Sc. (Econ.), Research Student, Delegacy for Social Training, Oxford.

(4) *When commenced and when likely to be completed?:* Commenced April, 1949, completion expected in April, 1951.

(5) *Have any results been published and where?:* No results so far published.

VIII. Cerebral Maturation and its Relation to Aberrant Behaviour

(1) Musgrove Park Hospital, Taunton, Somerset, Neuro-psychiatric and E.E.G. Department. Dr. R. Sessions Hodge, J. A. Maddocks and Miss Jeanne Rex.

(2) Attempted correlation of particular E.E.G. findings with Rorschach results and colour perception during Photic Stimulation.

[All patients submitted to the Department, whether for behaviour disorder or otherwise, are examined by exposure to cerebral stress with pattern light flashes by a new method designed here.]

(3) Dr. R. Sessions Hodge.

(4) Commenced 1949.

(5) Preliminary communication to E.E.G. Society, Spring, 1950.

IX. Analysis of Intake at a Classifying School for Girls

(1) Miss Gertrude Keir, M.A., Lecturer in Psychology, University College, London.

(2) An analysis of the intake at a Classifying School for Girls committed to Approved Schools.

(3) As a thesis for the degree of M.A. in the University of London. *Supervisor:* Miss Keir. *Research worker:* Miss Mary Tingle, B.A.

(4) Commenced 1950, likely to be completed 1951.

(5) Nothing so far published.

X. A Local Study of Juvenile Delinquency in the Neighbourhood of a University Settlement

(1) Mr. J. B. Mays, Warden, Liverpool University Settlement, Nile Street, Liverpool.

(2) Liverpool University Settlement is undertaking an enquiry into Juvenile Delinquency in the area within its own immediate vicinity. The area for study is defined by those streets from which the Settlement Boys' Club draws its membership.

An intensive study will be made of contemporary club attenders so that a complete picture, taking into account home conditions, employment, religion, education, etc., of any delinquent or near-delinquent members may be obtained. It is hoped to analyse the extent to which Juvenile Delinquency is accepted as a 'normal' or 'abnormal' pattern of behaviour by the social groups or communities around. Special attention will be paid to the effectiveness of existing methods of therapy and to other possible methods of readjustment within this specific area in relation both to the individual and to the structure of social groups.

During this investigation of a population of about 10,000 it is expected that some groups and communities will be found existing within the larger community with markedly differentiated social attitudes (as, for example, a block of tenements with a high degree of self-organization). Such groups will need to be taken into consideration and their significance and influence assessed.

The enquiry will involve the testing of certain basic assumptions:

(*a*) That the degree of delinquent behaviour is much higher than is generally supposed or revealed by official statistics.

(*b*) That adult attitudes to delinquency and to delinquents form an important part of the whole situation.

(*c*) That inconsistencies and incompatibilities between the attitudes towards delinquents on the part of probation officers, police, teachers, club leaders and others may in part be responsible for some ineffectiveness of treatment.

(*d*) That delinquency is a pattern of behaviour which is an integral part of the culture of a social group and can only be understood in terms of its function in relation to group structure and individual adjustment in relation thereto.

(3) Department of Social Science, University of Liverpool, under the supervision of Professor T. S. Simey.

(4) Commenced in 1950, expected to cover two or three years.

(5) Nothing so far published.

XI. Survey of Activities Concerned with Juvenile Delinquency: A Note by John A. Mack (University of Glasgow) [1]

I am grateful to the Editors of the Journal for this opportunity of describing the work of the survey. Initiated and sponsored by the Carnegie United Kingdom Trust, it is a short-term and individual investigation designed to map the salient features of the whole field rather than to pursue research in any one part of it. It is hoped that the surveyor will be able, in the course of his activities, to draw attention to any gap which might be filled by the action of either statutory or voluntary bodies in furthering existing schemes or initiating new ones: and to draw the attention of the Trustees to any service which they might effectively render by initiating and financing genuinely pioneer work of either a preventive

[1] Although, as Mr. Mack states, his survey is not intended to be research in the usual sense of the term, it is obviously of considerable interest to all those concerned with juvenile delinquency as research workers or otherwise. We are very pleased, therefore, to publish his Note in this Section. Mr. Mack is Stevenson Lecturer in Citizenship in the University of Glasgow. (Ed.)

or remedial kind. In accordance with the practice of the Trust, the surveyor has been given a free hand in determining the scope and emphasis of the investigation. The last few months have been spent in preliminary exploration of these matters, and the main work of the survey will be completed, it is hoped, by the summer of 1951.

It will not be possible to cover the whole of the field in depth—it is too large and too complex. One must concentrate on a smaller area for detailed treatment, dealing with the rest in a more general way. Should it be the treatment and after-care of declared delinquents, as operated by the institutional complex of police, courts, probation, approved schools, and so on? Or should the emphasis be laid on the range of social and educational and research activities now being deployed on the detection and preventive treatment of pre-disposing factors, or 'pre-delinquency'? Obviously both must be studied, but if a choice has to be made the circumstances of the case and the orientation of the survey would seem to favour the latter for special study. The trend of research and of social administration, and the movement of opinion among many Magistrates, Probation Officers and Approved School Headmasters, is in this direction.

A study of 'pre-delinquency', and of the treatment of young offenders with a view to finding out what makes them offenders, must deal not only with declared or discovered delinquents, but also with those who do not come or have not come before the Court. It will be remembered that Sir Cyril Burt's comprehensive investigation, unlike some more recent studies, was based on cases of both 'court' and 'non-court' delinquents, drawn from the work of child guidance clinics. It is of course true that courts to-day take in a much higher proportion of young offenders than they did before 1933, but a sample drawn exclusively from court or police records would still give a distorted picture of the actual situation, in that it would inadequately represent the young delinquents of the higher income-groups. Any investigation of predisposing factors and of effective prevention would obviously benefit greatly from a study of the informal organization of the better schools and neighbourhoods, if such a study were feasible. I should be grateful to hear from anyone already interested in this question, and already working on it, however tentatively.

The field of pre-delinquency might also be widened to include the detection and treatment of a wider range of maladjustments and behaviour disturbances. This does not assume that the bulk of delinquents are anything other than healthy and undisciplined children who require firm handling and in some cases the shock treatment of sharp punishment—and a few of whom through wrong handling become habitual offenders. The whole trend of expert and experienced opinion goes to indicate however that a small proportion of delinquents, showing emotional instability or other emotional disturbance to an unusual degree, are very strongly represented in the 'hard core' of persistent offenders; and it is a fair inference from clinical experience (I speak, of course, from hearsay) that the group of emotionally disturbed youngsters who become delinquent is only one of many such groups. Whether delinquency of this serious kind can be traced to constitutional or to inter-personal (family) factors, and whether delinquency is a 'psychiatric entity', are unsettled and controversial questions: but it can be agreed that to get to know more about juvenile delinquency it will be wise to study a range of behaviour and of behaviour disorders much wider than delinquency.

Such an approach has the additional advantage that it turns the Maginot line or Chinese Wall that has hitherto kept the ' juvenile delinquent ' in a separate and somewhat shameful social isolation, and so prevented, particularly at the local authority level, adequate social action.

One survey project may turn out to be interesting. It is to study the situation in a local community intensively, through the eyes of the people already active, by means of a residential working conference or ' survey workshop '. Besides going round and talking to the key people one by one and for short periods, the opportunity is given by the ' workshop ' to consult them collectively and in conditions which permit thorough and continuous discussion. The main work would be done by small groups of eight or ten, each a microcosm of the whole group, and each containing an outsider, qualified to provoke discussion on aspects usually taken for granted by people already inside the work and used to each other. This model of discussion-investigation has already been effective in my own experience with industrial managers and trade unionists who have discovered *unexpected* points of fundamental agreement, and disagreement, in discussion with colleagues whose attitudes and opinions they had hitherto taken for granted. The usefulness of such a survey workshop in telescoping my inquiry, both in the sense of bringing everyone together and of bringing distant things nearer, need not be laboured. Its value to the local community may be equally marked, if we may judge by the industrial precedents already referred to.

The actual topic to be discussed, which would determine the composition of the group, could be one of at least three possible topics. First, a review of the working of the ' official ' institutional complex itself, centering on one court or set of neighbouring courts and bringing in representatives of receiving institutions as well as the magistrates and officials attending the court(s) regularly. Secondly, a review of the whole range of social services set up as a result of recent legislation and still finding its bearings, studied in a well-doing community, a kind of administrative analogy to Kipling's ' Ship That Found Herself '. Thirdly, and this may prove to be the actual topic, a kind of local stock-taking with a view to determining lines of experimental action and indeed of ' operational research ' in the future, an intensification of the kind of work now being cautiously attempted or anticipated in discussion by the more active of the local committees set up in many places as a result of the National Conference of March, 1949. It is a healthy sign that these committees, while they conclude with reason that a good deal is already known for practical purposes, so often and so readily perceive the need for continuous and thorough investigation of questions of causation, and of validation of practical measures. It opens up a prospect of most fruitful co-operation between scientific workers and practical people, and a ' survey workshop ' might do good service if it explored this possibility.

The surveyor will be most grateful for information and views bearing on all aspects of the subject. The fullest co-operation has already been extended by all the Departments and voluntary bodies already concerned with young delinquents and notably by the Magistrates' Association, the National Association for Mental Health, and the Institute for the Study and Treatment of Delinquency. The co-operation of colleagues in the Universities can of course be taken for granted, and it is hoped to consult the appropriate University Departments fairly fully.

The survey office is at 3 University Gardens, Glasgow, W.2.

REVIEWS

AUTHORITY AND DELINQUENCY IN THE MODERN STATE: A Criminological Approach to the Problem of Power. By Alex Comfort. (London: Routledge and Kegan Paul Ltd. 1950. Price 8*s.* 6*d.*)

The problems which Dr. Comfort has set himself to discuss appear to be twofold: what part is played by psychopathic personalities in the shaping and execution of policy in the modern state, and conversely, to what extent does the institutional framework elicit and stimulate abnormalities? These are questions clearly of great importance, and what Dr. Comfort has to say about them is of profound interest. He sets out in broad outline the part that is likely to be played by the various types of aberrant personality in public life and the circumstances in which psychopathic traits are likely to acquire importance. It must, however, be confessed that the factual basis of his argument is extremely slender. Dr. Comfort himself draws attention to the practical difficulties of verifying any hypothesis about the motivation of politicians or other leaders in public life (p. 46), but his treatment creates the impression that greater progress has been made in the compilation and analysis of the necessary data than is in fact the case. Anyone who reviews the recent literature of the study of leadership, for example, cannot but be struck with the triviality of the results so far attained and of the methods used in arriving at them. Even in the limited field of occupational selection we know very little about the factors which enable people to rise to important positions. The psychologist may recognize here and there, say, the 'inherent boss'; but he rarely has the opportunity of a close study of his character, and he has no information at all of the frequency with which this particular type occurs in the various branches of economic life and of its importance in the shaping of the economic structure. In the sphere of government the evidence relating to the part played by psychopathic personalities is—apart perhaps from the study of the Nazi leaders—of merely anecdotal nature, and is certainly not of the kind which the psychiatrist would require in his own domain of study.

Dr. Comfort's discussion of the psychology of modern war is very illuminating. He brings out very clearly the opportunities that war offers to the psychopath and the methods that are used to make war acceptable to the mass of the citizens that are not psychopaths. In this account he shows more balance and caution than is usual in this field and he gives due weight to economic and political factors in the causation of war. Yet his treatment is not entirely consistent. It is one thing to say that individual aggressiveness, projection, stereotypes, etc., play an important part in war once it breaks out. It is quite another to say that the 'war-orientation of modern societies is unquestionably the outcome of such factors' (p. 51). To establish this hypothesis it would be necessary to enquire how far societies differ in the amount and kind of repression to which they subject the aggressive tendencies of their members, and how far these differences are correlated with tendencies to war. Such an enquiry involves extensive historical and comparative study, and until this is undertaken, there can be no real evidence for the view which traces war to tensions or conflicts within the individual mind.

On the converse influence of the institutional framework on behaviour Dr. Comfort's views are of great interest, though they are not set out very systematic-

ally. In one passage he expresses agreement with the view now widely canvassed that changes in social structure depend essentially on changes in the methods of bringing up children. ' It would be perfectly possible ', he says, ' to make a case that the changes in a given culture which might follow a shift in the pattern of infant-feeding behaviour are likely to be more extensive than those arising from a revolution in the distribution of economic and political power ' (p. 93). It would be interesting to know on what evidence this case rests. So far as I know the only evidence so far adduced is derived from a very few studies of primitive communities in which psychopathological interpretations have been imposed on data of doubtful reliability. So far as the vast field of the historical and contemporary societies is concerned such hypotheses have hardly begun to be tested. In the main, however, Dr. Comfort is interested in the effects on character of what he calls the centralized states of the modern world, and in the opportunities they offer to aberrant or psychopathic personalities. Here again the lack of comparative material is likely to lead to hasty conclusions. It is by no means obvious that modern states offer greater scope to psychopathic characters than were open in the period of warring barons and ambitious churchmen, or, for that matter, in relatively isolated and inbred small scale societies, though, of course, the mischief they can work is enormously greater owing to the powerful weapons which modern technology puts at their disposal. Perhaps the most important part of Dr. Comfort's discussion is that which is devoted to the dangers arising out of the use made by modern governments of what he calls ' irresponsible or potentially irresponsible *élite* groups '. This enables legislators to get policies carried into physical effect from which they would recoil if they had to do the work themselves, while the agents employed can rationalize their actions by transferring responsibility to the authorities on whose behalf they act. In an atomic age the terrible consequences likely to follow from such division and abrogation of responsibility are only too clear, and similar problems might well arise in connection with the social sciences in proportion as these become more effective. The conditions under which the practitioners of these sciences can co-operate with established authority may thus come to present a moral problem as acute as that which workers in the physical sciences now have to face.

MORRIS GINSBERG.

PROBLEMS OF CLASSIFICATION IN THE ENGLISH PENAL AND REFORMATORY SYSTEM. By Hermann Mannheim, Dr. jur. and J. C. Spencer, M.A., J.P. (London : Institute for the Study and Treatment of Delinquency. 1950. Pp. 24. Price 1*s*.)

The authors of this pamphlet have made a fairly detailed survey of the various procedures of classification which are given effect in English Prisons, Borstals, and Approved Schools. Part I deals with the general problems of classification and the arguments pro and con are clearly stated. While the authors do not attempt to dogmatize, the enthusiasm they show for the more scientific procedures adopted in the classification of Borstal youths at the Reception and Allocation Centres of Latchmere House and Wormwood Scrubs suggests that they are in favour of classification provided it is not too rigid. The aim of classification in their view should be to simplify over-elaborate personality groupings and in this way not only promote better treatment for the individual delinquent but also iron out some administrative difficulties. The authors quote the opinions of others on the subject

of classification in allied fields and their mention of the work of Dr. Georg K. Stürup at the Danish 'Asylum for Psychopathic Criminals' at Herstedvester reminds us forcibly of the lack of an institution for 'abnormal and unusual types' of criminals in our own country. Of particular interest is the clear exposition of the principal features of present-day classification systems (sex, age groups, criminal antecedents, etc.) although the reviewer feels that this section would have gained considerably had more examples from other countries been cited. The only reference seems to be to the Elmira Reformatory in America.

In Part II the authors examine in detail the methods of classification employed in Prisons, Borstal Institutions and Approved Schools. The reader is at once impressed by the varying degree of progress in classification made in these different fields. The Prison system lags well behind the others, but the authors rightly draw attention to the handicap of unsuitable buildings, and by appropriate quotations from the reports of the Prison Commissioners themselves give the latter the credit of at least being aware of their problems even if they have not solved them. Apart from this difficulty, there is also the financial problem of a specialist staff; and while the authors seem to agree that nothing less than a fully qualified and trained staff can carry out the work of classification with any real hope of success, they make no mention of this very serious difficulty. Attention is drawn to the problem of prison records and the need for improvement in their compilation; the authors' suggestion of research in co-operation with the Universities is worthy of the attention of the Prison Commissioners. It has not been easy in the past for persons interested in the problems of Prisons and Borstals to gain access to the material available concerning these Institutions.

A detailed account is given of the Borstal methods of classification, and the reviewer agrees entirely with the authors' criticism that the Allocation Board does not include members of the disciplinary staff. Such officers are in an advantageous position to observe personality in action and their observations are likely to be sharpened by discussion with others. The difficulties of allocation are pointed out. The contradictory nature of criteria at times makes the final recommendation appear unsuitable although no doubt the best under the circumstances. For example, personality defect may suggest one type of receiving establishment, technical training another, and nearness to home another. The authors draw attention to these difficulties but give us no hint of the methods employed by Allocation Boards in solving them. Is most weight given to the Psychiatrist's or the Psychologist's or the Vocational Guidance Officer's opinion, for instance? A verbatim account of a Board discussion on a difficult case might have been very enlightening.

In the case of Approved Schools the impression is given that the real nature of the problem is not yet clear: experiments of various kinds have been carried out, various testing techniques have been tried and discarded, and it may be some time before agreement is reached on the principles which should determine the classification of the receiving schools themselves. It is good to see that the authors recommend the inclusion of psychiatric social workers in the allocation teams of Approved Schools. The important rôle played by these workers in Borstal allocation procedure leads one to believe that they would provide a most useful link between school and home and so provide a clearer picture of the social capacities of young delinquents prior to allocation to an approved school.

A plea is made for the increased use of psychiatry; and throughout the pamphlet

emphasis is laid on the need for research and trained personnel. Dr. Mannheim and Mr. Spencer have given a very clear survey of their subject and have drawn attention to many of the problems involved. The pamphlet is recommended strongly to all who are interested in delinquency and its treatment.

K. HARRISON.

THE YOUNG LAG. By Sir Leo Page. (London: Faber & Faber. 1950. Pp. 320. Price 18*s.*)

Sir Leo Page has long been known as an ardent supporter of prison reform and a critic with an acid pen for magisterial conduct in Courts and for the weaknesses of the Probation system.

In this volume he brings his long experience to bear on the problem of Juvenile Crime, and expresses his justifiable alarm at its increase in this country. To this end, and before stating his ideas on the management of the Young Lag, he gives a series of case studies of young men whom he had personally interviewed. Frankly, these cases are most disappointingly set forth. The life histories in outline have an authentic note but the vital features, the flesh and blood, seems to be wholly absent. Persons do not emerge but merely facts, bald and unelaborated. There is, indeed, a striking absence of that compassionate note which one would have expected from a protagonist of religious faith and training.

That Sir Leo has little use for psychology is clear from a long and rather vindictive chapter devoted to the psychological technicians, as Sir Leo views them. At this period in psychiatric history it would be foolish to deny that we have sometimes put over our views crudely, with misplaced emphasis and with an air of too great assurance. The author has taken full advantage of these errors and in so doing he has lost, perhaps deliberately, the main tenets of psychological theory and therapeutic practice; and because of this his theory of religious discipline and social discipline while, in the light of tradition, understandable enough, is inclined to block any progress in our understanding of the deeper sources of human nature. In fact, had he cared to study the literature of psychoanalytic clinical experience he would have seen what light it sheds on the nature of these disciplines he so ardently wishes to impose. If a given delinquent is blind to religious ideals, one must surely look for reasons for his rebellion against tradition, and if he is to be placed in clubs for social reclamation he must be studied in the light of his incapacity to accept the goods that society can give him. The book is important mainly because it gives the attitude of the intransigent opponents of the scientific and, indeed, of the humanistic outlook on Delinquency. Nevertheless, many of his suggestions for salvaging delinquents by social means can be commended. Planning of leisure, the increasing facilities for group games in playing field and club. Psychiatry has nothing but support for these measures sometimes as the central need of the offenders, sometimes as necessary ancillary social aids. Nor do psychiatrists sweep aside the value of a disciplined life, but they have attempted to differentiate types which are and which are not capable of discipline. To build up religious values in those who have lost them or never acquired them is another matter.

The good club leader, religious or otherwise, has an important function to perform in this type of reclamation. The good psychiatrist can perform the same function because in some respects he, too, satisfies the same needs.

E. M.

MODERN CHILD PSYCHOLOGY. By Agatha H. Bowley, M.A., Ph.D. (London: Hutchinson University Library. 1950. Price 7*s.* 6*d.*)

This is a straightforward exposition of child development, particularly in the first ten years of life. It is written for general readers in a chatty style which sometimes becomes a little untidy, but still readable and very informative. Two or three pages are devoted to the more objective causes of delinquencies, yet the author devotes a long and accurate chapter to psycho-analysis from which many of the deeper causes of delinquency might have been inferred.

The book is well documented, almost too much so for so popular a book.

E. M.

ANALYTICAL GROUP PSYCHOTHERAPY—WITH CHILDREN, ADOLESCENTS AND ADULTS. By S. R. Slavson. (New York: Columbia University Press. 1950. Pp. 275. Price $3.50.)

Mr. Slavson is known as a pioneer of the new technique of Group Therapy, and in this volume he enunciates his views and defines his terms against a background of psycho-analysis. He shows how the early class or didactic method was hortatory suggestive and ego-strengthening with some implied transference in so far as the teacher played a paternal rôle. Pratt, who started this method, did not intend therapy by altering mental dynamics, and it was not till Schilder embarked on actual group treatment that psycho-analytic theory entered into the method both as theory and practice. A multitude of deviations have since occurred both in the U.S.A. and Britain.

Slavson attempts in this volume to show how in groups many of the phenomena observed in analysis of individuals take on a new expression and how by the interplay of several patients mental dynamics are distributed and concentrated in the life history of the group. The vexed question of how transference operates is still not yet clear and certainly classical analysts will withhold judgment before they accept his conclusions. That the group situation is a dynamic one is beyond doubt, and it does, indeed, throw some light in the nature of group cohesion and group disruption. For adolescents and children, particularly in institutions, it is of value and remains to be seen to what extent it might be used in the treatment of delinquents.

Under the guidance of good leaders psycho-analytically inspired, it might well revolutionize the life and purpose of institutions dealing with young offenders. This is a volume worthy of close study howbeit with a critical mind.

E. M.

MANDLIGE LANDSSVIGERE I DANMARK UNDER BESAETTELSEN ('Male Collaborators with the Germans in Denmark during the Occupation'). By Karl O. Christiansen. (Copenhagen: G. E. C. Gads Forlag. 1950. Pp. 174 and 32 pages of tables.)

The problems arising from the presence of a large number of collaborators were fortunately not experienced in this country during World War II. But in those countries which have been occupied by the enemy they provide a valuable field of study for the criminologist. One of the most useful and comprehensive pieces of work has been carried out by Karl Christiansen, a lecturer in the University of Copenhagen, working in the State prison while engaged in the collection

of his material. He has examined the records of 5,107 male collaborators from police and court sources, and in the case of 2,915 of these men he was able to supplement his information with a short interview. The author does not claim that his material was typical of the small but highly dangerous group of collaborators, but rather that it is representative of the much larger number of less serious offenders.

Although the work is written in Danish, an excellent twenty-two-page summary in English is included at the end of the book, and it is from this English summary that the present review is written. The material is classified into nine types of collaboration ranging from the milder and less dangerous group of watchmen in Denmark, comprising 36·6 per cent. of the total, to the much smaller group of informers, representing only 1·0 per cent., but containing the unstable and criminal personality whose criminality, like that of the Hipo Corps (2·4 per cent.) and the German Police (4·7 per cent.), constituted a serious menace to the security of the State.

The study is of particular interest inasmuch as it demonstrates the variety of situations which lead to the growth of collaboration. Turning to the nine ' dominance ' groups identified by the author we find that economic and occupational factors rank highest in the least dangerous groups in the causation of collaborative activity, while among the most serious groups among whom evidence of brutality is not infrequent, there is often a long history of unsatisfactory conditions during early childhood and of truancy and bad behaviour at school.

An examination of previous criminality among the collaborators reveals a record of offences in 31·6 per cent. of the offenders, yet only 2·8 per cent. had received sentences of one year's imprisonment or more. Serious criminality was not, therefore, a noticeable feature of their previous history. In terms of age-groupings, the highest crime-rate occurs in the groups between sixteen and twenty years of age, and it is still considerable in the group between twenty and twenty-five years; it declines with increasing age.

Comparison between the collaborators in Denmark and the deserter from the Armed Forces in this country reveals some interesting parallels. First, it shows how very small numerically is the group of really serious offenders and how important are early childhood experiences in the ætiology of their behaviour —a fact which the author in certain cases seems curiously unwilling to admit. Second, how considerable a reduction in the heavy penalties initially pronounced by the courts proved to be necessary. The demand for retribution and deterrence gave place to more rational considerations concerning the aim of punishment, and a very marked revision of the many heavy sentences which were originally imposed is seen to have taken place.

JOHN SPENCER.

CHILDREN IN TROUBLE. By F. T. Giles. (London: Oxford University Press and Geoffrey Cumberlege. 1950. Pp. 61. Price 1*s.* 9*d.*)

BORSTAL: A CRITICAL SURVEY. By Winifred A. Elkin and D. B. Kittermaster. (London: Howard League Publication, 1950. Pp. 43. Price 2*s.* 6*d.*)

Mr. Giles's booklet describing briefly and clearly the procedure at juvenile courts and the various methods of disposal of juvenile delinquents is a convenient

introduction to these subjects for persons who are ignorant of them. It would have been still more suitable had not the author been avowedly concerned to uphold existing systems of disposal. A booklet in which the flaws as well as the virtues of penal institutions are clearly set out is much to be desired.

By way of contrast the monograph of Miss Elkin and the Rev. Kittermaster combines a simple and objective account of Borstal, its history, law and practice, with a file of general criticisms and recommendations which are very temperately and modestly presented and at the same time very much to the point. Two comments may be permitted. The writers, by error of omission, appear to neglect the importance not only of applying psychological principles in the practices of penal institutions but of training institutional personnel in at least the rudiments of criminal psychology. Also they might have been more emphatic in their condemnation of such forms of routine and discipline as are mere remnants of prison rituals. An organisation with the honourable record of the Howard League must on no account forget that Penal Reform *is* psychological reform, and that the virtues of discipline presuppose a 'normal' readiness on the part of the Borstal inmate to benefit by discipline.

E. G.

ABSTRACTS

(Under the direction of W. R. Bett (London) with the co-operation of John C. Spencer (London).)

'The Unhappy Family and Delinquency.' *Eugenics Review* (July), 1950. **42,** 67–70.

Comments on the report, 'Delinquency and Human Nature,' sponsored by the Carnegie United Kingdom Trust. On the subject of voluntary sterilization it is suggested that 'measures to prevent maladjustment, neurosis and delinquency in children will be incomplete unless they include . . . the effort to help women whose incapacity to have care of children has been proved, to curtail their fertility'.

W. R. B.

'Children and the Cinema.' *Lancet* (May 13), 1950, **i,** 916. (Annotation.)

More than six million out of slightly above seven million children between the ages of five and fifteen in England, Wales, and Scotland visit the cinema. The 'Report of the Departmental Committee on Children and the Cinema' (H.M. Stationery Office. Pp. 107. 3*s*.) shows that of the large numbers of children questioned, 31 per cent. go to the cinema once a week, and another 21 per cent. twice a week or oftener. The Committee advise that no unaccompanied child under twelve years of age should be admitted to, or allowed to remain in, a cinema after 8 p.m. A new classification of films is recommended:

(1) 'X' films (including the present 'H'), from which children should be absolutely excluded.

(2) 'C' films, to be shown at children's cinema exhibitions.

(3) Advisory category 'U', which would be family entertainment, and advisory category 'A' which would be preferably for adults. Admission of children to the showing of films in these categories would be unrestricted.

The Committee did not attribute to the cinema ' any primary share of responsibility for delinquency or moral laxity of children under sixteen '.

T. H. B.

W. J. T. KIMBER: ' Illusion or Illumination: a Study of the Religious Process.' *Journal of Mental Science* (July), 1950, **96,** 663–80.

In his presidential address to the Section of Psychiatry of the Royal Society of Medicine Dr. Kimber discusses the prevalent disregard for organized religion as a challenge to psychiatrists. He touches briefly on the Freudian, Jungian, and Adlerian doctrines as they apply to the spiritual life, and describes three spheres of influence which constitute man's environment. The third or spiritual sphere he calls ' the Ultra-Conscious '.

S. COLEMAN: ' Migraine and Psychopathic Behaviour.' *Journal of Mental Science* (July), 1950, **96,** 758–69.

A man aged thirty-two who had been imprisoned between September, 1948, and June, 1949, for stealing from church offertory boxes, was admitted to hospital, having been put on probation because he had repeated the offence. He was reported to have had ' black outs ' for a number of years. Physical examination showed nothing abnormal. He had been an apparently normal person, with no evidence of neurosis, until he was aged twenty-two. At this time he was serving in the Army and received a left occipital head injury as the result of an explosion. He was knocked unconscious. On regaining consciousness he had a temporary blindness, followed by other visual disturbances, vomiting, and severe head pains. The latter two symptoms persisted for over a week. Three or four months later attacks of migraine began, consisting of left-sided head pain, visual and mental disturbances, and vomiting. They were associated with emotional stress and were described by the patient as ' black outs '.

Although there was no evidence that the attacks of migraine and the stealing were associated in time, it is suggested that these attacks allow an unconscious complex to emerge and dominate consciousness. The patient's ambivalent attitude to his Mother and to Mother Church is stressed, and his sexual excitement when stealing from the offertory boxes.

R. D. NEWTON.

S. R. LAYCOCK: ' Homosexuality—a Mental Hygiene Problem.' *Canadian Medical Association Journal* (September), 1950, **63,** 245–50. (Five references.)

Homosexuality has multiple causes. Many psychiatrists believe that in the development of an individual's love life there is a normal homosexual stage early in adolescence, so that homosexuality may be regarded as a state of arrested development of the love life. The first step in helping a homosexual is to accept him as a person needing treatment. He must not be allowed to injure others. He must be guided to find outlets for *all* his basic psychological needs in the best possible manner. He needs help in accepting his handicap objectively and then going on to realize his potentialities. Some homosexuals find marriage possible as a solution to their problems, but others cannot make that adjustment.

F. H. Allen: 'Aggression in Relation to Emotional Development, Normal and Pathological.' *Mental Hygiene* (July), 1950, **34,** 353–63.

Emphasis on aggression in the normal emotional development of the child is essential for an understanding of the integrating and differentiating nature of growth—a process involving interplay between alive people—aggression in relation to aggression. Aggression as the expression of the individual's vitality is translated into action and then into feeling around the limiting impact of an organizing force represented in the parent. With this impact frustration is associated. Without frustration there can be no awakening of the will to assert and test out the capacity to deal with external forces. As social scientists we must develop professional services to deal with abnormal expressions of aggression.

R. Grassberger: 'The Problem of Sex Offences.' *Health Education Journal*, (October) 1950, **8,** 158–61. (Summary.)

Punishment is not the only available measure for repressing sex offences. For perversions based on neurosis psychotherapy plus probation may prove adequate, but genuine perversion requires severer legal measures, assisted by therapeutic measures applied to personality as well as to environment. Possible victims should be protected.

Sir David K. Henderson: 'Reflections on Criminal Conduct and its Treatment.' *British Medical Journal*, (August 5) 1950, **ii,** 311–5. (Conclusion; appendix.)

Medical men have never wished to take over the functions of judge and jury or to influence them unduly. Primarily interested in caring for, and curing, the person affected, they are also concerned with the welfare of society. The legal and medical professions should appreciate each other's point of view. The writer recommends good psychiatric units for examination, observation, and treatment; well-equipped medical and nursing personnel; efficient after-care organization; determination of discharge on the basis of social stability; a colony for psychopathic states; a judiciary 'imbued with a remedial outlook and able to think in terms of illness and disease which may be entirely subjective'.

E. Overholser: 'Some Psychiatric Aspects of Delinquency.' *Transactions and Studies of the College of Physicians of Philadelphia*, (April) 1950, **18,** 22–8. (Nine references.)

S. Weir Mitchell Oration by the Professor of Psychiatry, George Washington University School of Medicine, Washington, D.C.

Education of parents is a desirable, but probably remote, goal. The psychiatrist does not have all the answers to the problem of delinquency. Interested in the individual's reaction to his environment, he can offer at least a modicum of help, not only in treating delinquency, but in preventing it.

J. H. Matthews: 'Narco-Analysis for Criminal Interrogation.' *Journal-Lancet*, (August) 1950, **70,** 283–9. (Summary; 30 references.)

The history of, and the various theories relating to, narco-analysis for criminal

interrogation are reviewed. Narco-analysis with pentothal, scopolamine, and morphine was successfully used in ten subjects. The necessity is stressed of a thorough knowledge of the subject's background and personality, and of the events leading up to the investigation.

L. PORTER: 'The Background of Delinquency.' *California Medicine*, (July) 1950, **73**, 16–21.

A child needs to be protected against confusion in authority and against uncertainty in family purpose. This is difficult since the social order itself is uncertain and disordered. Increasing delinquency may well be the forerunner of social collapse.

D. ABRAHAMSEN and R. PALM: 'Family Role in Diagnosis and Treatment of Offenders.' *Journal of Nervous and Mental Disease*, (October) 1950, **112**, 311–21. (Conclusions; summary; 8 references.)

Psychiatric examinations and Rorschach tests in offenders and members of their families have proved useful in exploring motivation of criminal activities; in treatment and adjustment of the offender; and in understanding of family dynamics and family pathology. An illustrative case-history is given.

LORD CHORLEY: 'Reason and the Growth of Law.' *Rationalist Annual for the Year* 1951. London: Watts & Co., pp. 41–50.

It is not possible to have a satisfactory system of law which diverges too widely from the accepted moral code of society. The legal rules relating to sexual behaviour do not conform exactly to the prevailing moral attitude to it. A man is entitled, even compelled, to regulate his life according to the laws of the society in which he lives. It is wrong to punish him with legal sanction for breaking the moral code, unless there was a breach of the legal code as well. The legal is more rigid than the moral code.

W. R. B.

R. S. TAYLOR: 'Corrective Training: Problems of Allocation'. *Probation, The Journal of the National Association of Probation Officers*, (September-October) 1950, **6**, 52–3.

The psychologist of the Corrective Training Allocation Centre at Reading discusses the principles and methods of Corrective Training under the Criminal Justice Act. Every man sentenced to this punishment spends approximately three weeks at the Allocation Centre at Reading. After the process of allocation is completed he is transferred to one of four types of prison training, ranging from the minimum security conditions at Sudbury to the closed prisons at Wormwood Scrubs and Chelmsford. Some information on age, previous convictions, and literacy of the first 500 men passing through the centre is also given.

EDWIN H. SUTHERLAND: 'The Diffusion of Sexual Psychopath Laws'. *American Journal of Sociology*, 1950, **56**, 142–9.

Since 1937 in U.S.A., twelve States and the District of Columbia have enacted Sexual Psychopath laws, providing generally for confinement of the person diag-

nosed in this way in a state hospital for the insane. Laws of this character have been passed during periods of considerable fear, intensified by the wide publicity given to the crimes. Generally a committee is entrusted with the task of taking positive action in response to public agitation. Psychiatrists have been divided in their attitude to legislation of this kind. These laws are consistent with the general social movement towards the treatment of criminals as patients, and they reflect the belief that sex criminals are psychopathic. States with these laws are not differentiated clearly from those without them by any statistical variable which has been discovered.

FREDERICK W. KILLIAN and RICHARD ARENS: 'Psychiatry in Soviet Criminal Proceedings'. *Journal of Criminal Law and Criminology*, (July-August) 1950, **61**, 136–49.

The early Soviet code practice largely reflected the Italian sociological school of Ferri. At present it stands repudiated, and the concept of individual guilt is authoritatively reaffirmed. Under Soviet law mental disease and absence of responsibility or 'accountability' are not co-extensive. It is interesting, therefore, that the McNaghten Rules have been attacked by the Soviet as conservative and out of date, on the grounds that they give insufficient weight to the expert witness and to scientific knowledge. There is a strong predisposition in the development of Soviet psychological thought towards the readoption of the irresistible impulse test. The RSFSR code has always been devoid of the concept of reduced responsibility, and the early Soviet trend of judging psychopaths 'as not accountable' has been completely reversed during the last decade.

PIERRE CANNAT: 'Les prisons aux Etats-Unis'. *Revue penitentiaire et de droit penal*, (July-September) 1950, 581–712.

A study of the penal system of the United States as the result of an invitation by the United Nations, by the Controller of the Prison services in France, covering the Federal system as well as the systems of the States of California, New Jersey, and New York. The author comments on the difficulty of comparing America and European penal institutions in view of the differing standards of living. At the same time he recognized a superiority in the American administration over the French, and emphasizes in particular the value of the probation system and the indeterminate sentence. The educative problem in the penal system is of supreme importance.

J. C. SPENCER.

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S. PONS: ' Aspetti medici delle cause e della prevenzione della criminalità e del trattamento dei delinquenti.' *Minerva Medica*, (October 20) 1950, anno **41,** vol. **ii**, Parte Varia 268–70.

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J. O. REINEMANN: ' Fifty Years of the Juvenile-Court Movement in the United States.' *Mental Hygiene*, (July) 1950, **34,** 391–9.

W. FLEESON, *et al.*: ' Group Therapy in a Child Guidance Clinic.' *Journal-Lancet*, (August) 1950, **70,** 290–2. (Conclusions; 8 references.)

E. STRANSKY: ' Das Initialdelikt.' *Archiv für Psychiatrie und Nervenkrankheiten*, 1950, **185⁴,** 395–413.

C.-N. CLEMENTE and C. GIANNETTO: ' Indicazioni e limiti della lobotomia prefrontale nella criminalità abituale.' *Rassegna di Neuropsichiatria*, (September-October) 1950, **4,** 440–6. (Three references.)

C.-N. CLEMENTE and C. GIANNETTO: ' La volontà nel determinismo della condotta criminale abituale dell' amorale.' *Rassegna di Neuropsichiatria*, (September-October) 1950, **4,** 447–54.

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NOTES

THE SECOND INTERNATIONAL CONGRESS OF CRIMINOLOGY

The First International Congress of Criminology was held in Rome in 1938 when the International Society of Criminology was founded, thanks mainly to the initiative of Professor di Tullio (Rome). After an interval of twelve years, the Second Congress took place in Paris from September 10 to 19, 1950, under the patronage of the President of the French Republic and under the Presidency of Professor Donnedieu de Vabres of the Sorbonne. It was attended by 760 persons from sixty countries, of whom 510 were full members, 137 associate members and 113 occasional participants. The strongest delegations came from France, Italy, and some South American countries, notably Argentine and Brazil. The administrative and scientific preparation of the work of the Congress was in the hands of a French Organizing Committee, assisted by National Committees, and the Secretary-General of the International Society, M. Piprot d'Alleaume, acted also as Secretary-General of the Congress.

As indicated in the first number of this Journal (p. 74), among the primary objects of the Congress were the following: to survey the methodology of the

various disciplines concerned with the study of crime (here the emphasis was on problems of etiology, and as far as penological subjects were discussed it was done mainly in view of the crime-producing potentialities of the various penal methods); to study the problem of the dangerous habitual offender, *l'état dangereux*; to agree on desirable objects for further research; to promote the development of the International Society and to discuss the establishment of an International Institute of Criminology. The work of the Congress was divided into the following sections: Sociology; Biology; Psychiatry, Psychology and Psycho-analysis; Legal Medicine and Police Science and Technique; Penitentiary Science; Juvenile Delinquency; Genesis of Crime in its social, biological, and psychological aspects; Diagnosis of *l'état dangereux*. Sections on Criminal Statistics, Comparative Criminal Law, and Moral Science were subsequently added. Except for the three last-mentioned subjects, printed General Reports in one of the three Congress languages, English, French, or Spanish, based on National Reports, had been distributed at the beginning of the Congress and formed the basis of its deliberations. Bulletins, issued almost every day, gave information on the work done in the Plenary Sessions and the Sections, on visits of observation, entertainments, etc. Space does not permit any detailed critical analysis of these General Reports, some of which were of great scientific value. Moreover, as meetings of the various Sections had to be held at the same time and there were also inevitable clashes with visits to penal and reformatory Institutions and cinema performances arranged for Congress members, many interesting discussions had to be missed even by the most conscientious delegate. A complete assessment of the work of the Congress is therefore impossible before the publication of its Transactions. This explains why the following accounts are largely limited to Sections regularly attended by the undersigned.

Only a few of the printed Reports are General Reports in the customary sense, i.e. incorporating the material presented in the National Reports and surveying the most important recent literature. This may have been due in part to the small number of National Reports received for some of the Sections which forced General Reporters to limit themselves to a presentation of their own views.

Sociology

Professor Thorsten Sellin, in his General Report, has admirably succeeded in surveying, briefly but never superficially, the whole range of current problems in the sociological approach to the study of crime and its specific methods, static or dynamic; control group, questionnaire and other techniques, now no longer limited to the handling of mass data but also employing the case study technique. He tries to correct the impression that the orientation of American criminological research is exclusively sociological and also the belief which, he thinks, is held by foreign scholars, that conditions in U.S.A. are so unique that the findings of American criminologists are inevitably of little use outside their country. 'The development of criminality during and immediately following the war in Europe clearly suggests,' he writes, 'that American sociological theories of criminality can be used elsewhere and in all probability have universal application. If they did not they should be changed, for theories that cannot be so formulated that they can be universally employed in research are invalid.' The answer to this seems to be that a theoretical formula can be right or wrong only in the light of the

factual data on which it is based. Where this factual basis does not exist the theory is likely to lose its practical significance, either altogether or in part, but this does not necessarily invalidate it for those areas for which it was originally formulated. For example, American findings on the criminogenic effect of mass-migration or of culture conflict do not become invalid in a country without such phenomena, but they may have very little practical value there, expect for purposes of prevention. Or: some of the factors regarded by the Gluecks as of major predictive value may have no such significance outside the U.S.A. This, though in no way affecting the validity of the Glueck technique of prediction as such, would make it necessary to search for other factors in the construction of Prediction Tables for other countries. Professor Sellin rightly stresses the need for criminological problems to be studied by teams of workers drawn from the different disciplines. In his view, the term 'Criminology' has so far only 'practical utility'; criminologists are still 'kings without a country', and advancement of criminological knowledge depends not on them but on sociologists, psychologists, etc., from whose labours an etiological science of Criminology may 'in due time emerge'. This is not the place for a critical discussion of this, perhaps all too modest, view of one of our most eminent criminologists. The point may be made, however, that criminologists, in particular in their control group research, have not seldom made important additions to the fund of existing sociological knowledge.

Discussions in this Section were largely concerned with the concept of crime (legal or sociological?) and with the merits of certain research techniques, especially the Questionnaire method; a motion which recommended the latter as preferable to, though to be supplemented by, the statistical and monographic methods was defeated.

Although strictly speaking outside the scope of this Section, the General Reports on Socio-Criminogenesis by Professor van Bemmelen (Leiden) and on Criminogenesis by Professor de Greeff (Louvain) should also be mentioned because of the light which they throw on important problems of Criminal Sociology. After forcefully stressing the close inter-relationship between sociological and psychological factors, van Bemmelen reviews some recent Dutch literature and gives, in particular, a detailed analysis of the important ecological study by Dr. W. H. Nagel, 'The Criminaliteit van Oss' (The Hague, 1949, in Dutch, with English and French Summaries). He discusses the criminogenic significance of sudden and violent changes in environment such as arise from rapid industrialization, war, migration, as well as of celibacy and a disproportion of the sexes. Professor de Greeff, in an extraordinarily stimulating and highly personal paper, demonstrates the criminogenic significance of the 'feeling of injustice', real or artificially inflated, which drives certain individuals to criminal acts even under the slightest environmental provocation—a category which may have reminded some members of his audience of one of the criminologically most interesting figures of world literature, Heinrich von Kleist's Michael Kohlhaas.

It was one of the greatest merits of the Congress to make members acquainted with research carried out in other countries—all the more important in view of the striking lack of any such information revealed in many Reports and discussions. To mention only a few of the sociological enquiries referred to in this Section, France has recently completed, under the direction of Professor Levy-Bruhl of

the Sorbonne, an enquiry by questionnaire into a few thousand cases of '*abus de confiance*' and, under the direction of M. Guilluy, into the social backgrounds of inmates of the *maison d'arrêt* of Rouen; Turkey, under the auspices of the University of Istanbul, has investigated the socio-criminogenic factors present in more than 6,000 prisoners and has now began an enquiry into juvenile delinquency. In Argentine a statistical study has been made of the changes in criminality throughout the whole country in the period 1938–48; and from India came a report on criminal tribes.

Juvenile Delinquency [1]

The work of this Section was mainly devoted to the General Report by Dr. Erwin Frey, the magistrate of the Juvenile Court in Basle, Switzerland; to the report by Professor Sheldon and Mrs. Eleanor Glueck on their investigations into juvenile delinquency; and to the proposal presented by M. Sinoir, on behalf of the French Commission on Juvenile Delinquency, on International Statistical Note-Book.

The main theme of the General Report by Dr. Frey was: (1) that the study of juvenile delinquency is the best approach to the understanding of serious adult delinquency, especially since the criminal history of practically all recidivists goes back to childhood; (2) that at present national statistics of crime have little value in research; local statistics, elaborated with precision, are more illuminating; while international statistics have no value whatsoever; (3) that all research should concentrate on the study of potential recidivists when they are still in their childhood, and should proceed in three ways: (*a*) by statistical studies covering total populations, (*b*) by serial investigations of particular problems, and (*c*) by intensive individual research of the total personality of the juvenile delinquent. The discussion showed an essential agreement on the importance of the problems of juvenile delinquency and the prognostic value of its study; the resolution passed by the Section supported Dr. Frey's views in that respect. With regard to methods, the discussion reflected the difference between some French speakers (in particular Professor Heuyer and M. Sinoir) stressing the necessity of international statistics and large-scale investigations based on internationally accepted definitions and taking all crimino-genetic factors into account; and the view of Professor Sheldon and Mrs. Eleanor Glueck (U.S.A.) regarding such attempts as impracticable, at least at the present time. The Canadian representative (Dr. Eva Bene) was equally opposed to the French approach and suggested isolating specific criminogenic factors for individual study, while the British speaker (T. Grygier) held an intermediate position, supporting Dr. Frey in his multi-dimensional method.

Psychiatry, Psychology and Psycho-analysis

Two general reports were discussed in this Section: one by the British representative, Dr. Denis Carroll, the other by Professor Daniel Lagache (France). Both reports covered a similar field but they differed in their approach in a most illuminating fashion.

Dr. Carroll's report was limited by the plan of the Congress to a critical statement and examination of present methodology with certain deductions about

[1] The reports on the Sections 'Juvenile Delinquency' and 'Psychiatry, Psychology and Psycho-analysis' are contributed by Dr. T. Grygier.

desirable future developments ; it was detailed and analytical. He presented the particular contributions of psychiatry, psychology and psycho-analysis to the methods and results of ætiological research on crime. He insisted on the rigorous scientific procedure and on the use of all available methods, but ' not always all at once '. He analysed the complexities of research and gave a balanced account of the value of different methods, all necessitating constant verification and modification of various conflicting theories by experiments: he showed how qualitative and quantitative researches should complement each other and how it is necessary to isolate certain factors and then to study their mutual relationships within the total personality. The success of Dr. Carroll's report was reflected in the resolution of the Section which embodied all his main suggestions.

Professor Lagache was given the task of preparing a report on the inter-relationship of the methodology in psychology, psychiatry and psycho-analysis with that of sociology and biology. His report was remarkable for its high degree of conceptualization, its precision of argument and logical deduction, and its extreme clarity of exposition. His general concepts of psycho-criminogenesis, linked with those of behaviour, personality, situation, and group participation, led him to the conclusion that there is no personality without a situation, and to the adoption of the clinical method on psycho-analytic lines which permits its meaningful study in the intra-personal and inter-personal aspects of behaviour. Crime was regarded by Professor Lagache as a concept of value, criminal personality as the effect of faulty socialization and identification.

The discussion revealed the same difference of approach between the French and the British with regard to other problems. The concept of psychopathy was criticized by many French speakers and rejected, while Dr. E. Glover (Great Britain) was ready to accept it on practical grounds in spite of its inadequacy, and described specific practical problems of psychotherapy with delinquents and the method developed at the Institute for the Scientific Treatment of Delinquency (to which, one should add, he himself had greatly contributed) which has been not less successful with psychopaths than with ordinary neurotics. Dr. Melitta Schmideberg presented a similar method, developed during her stay in Great Britain and now applied by her in the U.S.A. Dr. L. H. Rubinstein (Great Britain), expressed the desirability of funds being made available from a research foundation which would permit the application of psycho-analysis to a sufficiently large number of criminals. The suggestion (by T. G.) that the concept of normality be defined for each particular population according to the results of empirical and quantitative research met with opposition from the French speakers.

It must be admitted that the contribution of other representatives, in particular of American and Scandinavian countries, and of Belgium, Holland, Switzerland and Italy, was very rich and diverse. It was, however, not so easy to define as the distinct British and French approach to the problems within this Section, and for this reason it has been relatively neglected in this summary.

International Society of Criminology

The last two days of the Congress were devoted to the reconstitution of the International Society of Criminology which has its seat in Paris. A new Council of twenty-four members was elected, of whom two come from the U.S.A. (Professor Glueck and Professor Sellin) and two from Great Britain (Dr. Denis

Carroll and Dr. H. Mannheim). At the first meeting of the Council Dr. Carroll was elected President of the Society, in the place of Professor di Tullio, who was elected Honorary President, and Monsieur Pinatel, Inspecteur de l'Administration, was elected General Secretary in succession to Monsieur Piprot d'Alleaume, who became Honorary General Secretary. Preparations are in progress for the election of a Scientific Committee of fifteen members which will have the task, among others, of examining the possibility of establishing an International Institute of Criminology, of editing the Transactions of the Second Congress and of preparing the work of the Third Congress, to be held in Buenos Ayres in 1954 at the invitation of the Argentine Government.

In conclusion, it is only fitting to refer to the generous hospitality extended to Congress members by the French Government, the Organizing Committee, and many other public authorities and private individuals.

HERMANN MANNHEIM.

CHILDREN AND THE CINEMA

(*Report of the Departmental Committee on Children and the Cinema. H.M.S.O. Cmd.* 7945, *May*, 1950)

In December, 1947, a Departmental Committee was set up by the Home Office, the Scottish Office and the Ministry of Education to consider the effects of attendance at the cinema on children under the age of sixteen years, with special reference to children's cinema clubs: and to consider further whether, in the light of these effects, any modification of the existing system of film classification and of conditions of admission to the cinema were found to be necessary or desirable. This Committee ended its task with the publication of this Report on Children and the Cinema.

Under these main terms of reference the Committee investigated the following problems:

(i) The frequency of children's attendance at the ordinary cinema, and the types of films which they saw there.

(ii) The frequency of attendance at children's clubs and matinées and the conditions prevailing at such shows.

(iii) The effects of attendance at both types of cinema shows upon the young audience, particularly the physical, nervous and moral effects. Special attention was directed to the possible connection between attendance at the cinema and juvenile delinquency.

Methods of Enquiry

The Committee has pursued its task with as much thoroughness as time and circumstances permitted. The method used in the investigation can be summarized briefly as follows:

(1) Collation of results obtained by prior research. The data cited in the Report obtained from these sources are mainly concerned with figures for attendance at the cinema. Thus the Report makes use of data collected in 1945 in the Scottish survey carried out by the Scottish Educational Film Association.

(2) The Committee sponsored special investigations, and utilized data obtained from four studies. Figures for attendance were available from an L.C.C. survey

made in 1948 in which 14,500 school children in the London area were questioned by their teachers. Fresh facts came to light through the research carried out in 1948 by the Federation of Education Committees (Wales and Monmouthshire) in which a sample of upwards of 65,000 children were questioned by their teachers. A third investigation was that carried out by Social Survey on a random sample of 2,000 children between the ages of five and fifteen years attending primary and secondary schools in England, Scotland and Wales. The older children were given a questionnaire to fill in at school, while the mothers of the younger children were interviewed in their own homes. A great deal of information regarding frequency of attendance, films preferred, types of film stars liked, and the ambitions and hobbies of the children themselves was obtained. Finally, at least one other study was undertaken by students of the Applied Psychological Research Unit at Cambridge University on the incidence of hooliganism after seeing certain films.

(3) The Committee itself carried out a good deal of work.

(i) Members of the Committee visited children's clubs and filled in a standardized report form following their visits (Appendix VI, p. 106).

(ii) A questionnaire was sent out to various experts to ask for information on specific points concerning the relation between cinema-going and juvenile delinquency or moral laxity. Some 1,300 people filled in this questionnaire (pp. 48–49).

(iii) A small sample of children in approved schools were questioned as to the possible effect of cinema-going on their delinquent behaviour (p. 51).

(iv) Evidence by interview or by memoranda was obtained from very many interested and knowledgeable organizations and individuals (Appendix II, pp. 92–97).[1]

Results

(i) *Frequency of Attendance at Ordinary Cinema Shows.* Data from all these sources and by all these methods brought to light the following facts: In the London area 27 per cent. of children between the ages of five and fourteen years go to the cinema at least twice a week, while 30 per cent. attend once a week. The comparable figures for the L.C.C. survey carried out in 1931 are 9 per cent. and 23 per cent. respectively. In Wales and Monmouthshire nearly 23 per cent. of the children go twice a week or oftener, while 26 per cent. go once a week. In Scotland the figures are even higher: 37 per cent. attend twice a week or oftener, while 43 per cent. attend once a week. The data obtained by Social Survey bear out these figures for the country as a whole. In this sample 47 per cent. of the boys and 24 per cent. of the girls under the ages of ten years went to the cinema once a week or oftener: for children between ten and fifteen years these figures rise to 72 per cent. of the boys and 66 per cent. of the girls.

(ii) *Frequency of Attendance at Special Cinema Shows.* Figures show that nearly 900,000 children a week attend either children's cinema clubs or children's matinees, which number about 2,000 throughout the country.

Evidence seems conclusive, therefore, that large numbers of children in every area attend the cinema very regularly, and the London data show the rise in attendance over a period of some seventeen years.

[1] Miss Keir was among those who gave evidence before the Committee (Ed.).

(iii) *Effects of Cinema-going on Children.* For the majority of people, interest in this Report will mainly centre round the section on the effects of cinema attendance. The Committee states in the Report that ' There is a good deal of agreement among adult witnesses about the more immediate and obvious effects of films on children, both for good and ill. There is much less agreement about the more remote and lasting psychological or physical effects. It is, however, with these more deep-seated influences that the serious social problems of juvenile misdemeanour have been linked in the public mind and it is these deeper and more enigmatic issues which constitute in fact our main field of reference ' (p. 42).

The evidence which the Committee bore in mind when drafting the Report comes from mothers interviewed by Social Survey, from the replies to the questionnaire sent out by the Committee itself, from the small enquiry carried out with children in approved schools and from questions addressed to witnesses. Few fresh data were collected regarding the physical effects of film viewing, and the Report stresses that an important field for further investigation lies waiting to be explored. Regarding other effects it is interesting to note that Social Survey reports that ' One in two of the mothers (interviewed) replied in the negative — that films had no effect on children ' (' Children and the Cinema ', p. 59. Social Survey). Those who gave positive replies mainly said that their children had been frightened by some films, or had had nightmares after going to the cinema. From other sources of evidence there seems a measure of agreement that certain films such as those depicting brutal violence or low sexual standards are unsuitable and that children should not be permitted to see them. The Committee were impressed by the statement that ' The most serious effects of the cinema lie in the more elusive influences, the attitudes, values and type of life it advocates. . . . Continual exposure to such films undermines the child's social sense and may from its beginning vitiate his training for citizenship'. The Committee agrees with this, and points out in the Report that ' A large number of films are exposing children regularly to the suggestion that the highest values in life are riches, power, luxury and public adulation, and that it does not matter very much how these are attained or used ' (p. 47).

This is in agreement with the view of Sir Cyril Burt, expressed some quarter of a century ago in ' The Young Delinquent ' (1925) on the alleged influence of the cinema on the young delinquent. While generally of the opinion that there is little connection between the two, he states: ' Deceit, flirtation, jealousy, unscrupulous intrigue and reckless assault are depicted as the normal characteristics of the everyday conduct of adults. The child with no background of experience by which to correct the picture forms a notion, altogether distorted, of social life and manners ' (p. 148). This he considers to be the most powerful as well as the most insidious effect for the worse of the cinema.

Turning more particularly to the causation of delinquency, the Report goes on: ' In view of the increase in juvenile delinquency in recent years we thought it important to ascertain on a comprehensive basis the views and experience of those whose work brings them in close personal touch with young delinquents or with juveniles whose conduct has shown moral laxity of a kind which had brought them before a juvenile court as being in need of care or protection or as being beyond control ' (p. 3). Accordingly the Committee addressed an enquiry to chairmen of juvenile courts, probation officers, directors of child guidance

clinics, chief constables, teachers in approved schools and others directly dealing with these children. In all, the views of 1,344 people were obtained. Two main questions were addressed to them:

(i) whether they thought there was any connection between attendance at the cinema and moral laxity or juvenile delinquency;

(ii) whether, if they thought there was, this was held to be slight or a substantial connection.

We are told that the latter question was divided into eight sub-headings. It is a pity that the Report does not contain a copy of this enquiry. The obvious criticism that the questions seem general and open to ambiguity might not be pertinent if one could see a copy of the questionnaire. As might perhaps have been expected the answers were almost equally divided between those who thought there was a connection and those who thought there was not. The replies to the second question, however, bring out a slightly different picture. The majority thought there was no substantial connection between delinquency or moral laxity and film-going for boys and girls under twelve years of age. In the case of older children, twelve to fourteen years old, the relation was held to be slight as regards delinquency by the majority of those questioned. A small majority considered the connection substantial as regards moral laxity, particularly in girls.

The section dealing with this questionnaire is somewhat unsatisfactory, since we do not know what forms the questions took, nor what was meant by the words ' substantial ' and ' slight '. Information was further asked for on two points:

(i) The extent to which delinquents imitate incidents seen in films.

(ii) The extent to which children steal in order to go to the cinema.

(i) Those answering the enquiry were asked to say what proportion of cases they had dealt with in the six months prior to June, 1948, where children referred to the juvenile courts were there as a result of direct imitation of incidents seen in films. Of 38,000 children appearing there were only 141 cases in which delinquency and only 112 in which moral laxity seemed to follow directly on an incident seen in a film.

(ii) The chief constables in England, Wales and Scotland were asked to give numbers of children in their areas who had been charged with stealing in order to get money to go to the films. During 1947 there were 246 prosecutions of this nature, of which 120 were in Scotland.

The Committee as a whole came to the conclusion that ' the results do not, in our judgment, fasten on the cinema any primary share of responsibility for the delinquency or moral laxity of children under 16 ' (p. 52).

On the third way in which delinquency and the cinema might well be connected, through the insidious lowering of moral standards in the child, or the easy acceptance of false values and ideals, the Committee had already commented. The remedy for this would appear to lie in the provision of more healthy films of a family nature.

As a whole this Report shows extreme care, not only in the obtaining of evidence by varied means, but in the sifting of data and in the dispassionate summing up of evidence. The final conclusions from all the evidence collected are as follows:

(i) There can be no doubt that children go and will probably continue to go to films very regularly.

(ii) While many of the films they see are good, a number of them are bad in the sense that they portray scenes of brutality or sexual license. Such films should be banned for children. Quite a number of films frighten children, and

very many, though not positively and immediately harmful, tend nevertheless to leave children with a distorted sense of the realities of living.

(iii) As regard the real effects of films, little is known. The Report stresses the need for further scientific investigation into the physical, intellectual and emotional effects of films on children. One of the most valuable sections of the Report is that in Appendix I (pp. 89–91) in which a comprehensive list of suggestions for further research are laid out at some length. The assumptions underlying possible social effects of attendance at the cinema are clearly stated and it is rightly suggested that these basic assumptions need further careful examination. The criticisms made in the Report of existing methods of research in this field are pertinent and it is plain that much attention will have to be directed towards more effective methods of obtaining the data required. The Report stresses that ' It is urgently desirable that a few experts who are both psychologists and adequately equipped statisticians should at once be given the task of a thoroughly critical examination of the methods that are suitable for the analysis of social data concerning the effects of cinema attendance upon children and of the assumptions, both psychological and statistical, upon which they are based ' (p. 91).

There are obvious difficulties in any attempt to separate the influence of the cinema from other media by which the growing child is surrounded. There are further difficulties in any attempt to assess the way in which attitudes, sentiments and values have been built up by films, and in estimating the extent to which such attitudes issue in action. The Report performs a valuable service first in indicating the need for such research, further in stressing the need for examination of present research techniques. The Report has no suggestions to offer on how such difficulties can be overcome, being rightly of the opinion that attempts to solve them should be left to those in whose hands this future research must lie.

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A NEW PRISON FOR PSYCHOPATHIC AND OTHER MENTALLY ABNORMAL OFFENDERS IN NORWAY (*Ilebu Sikringsanstalt*)

A new Detention Institution (*sikringsanstalt*) is about to be opened in Norway. It is situated near Oslo at Grini, and has recently been used as a prison for traitors. The main building was not quite completed when the war broke out. It has now been repaired and partly rebuilt for the new purpose. Workshops will be provided outside the main building which is supposed to accommodate approximately 150 prisoners.

According to Sections 39 and 39*a* of the Criminal Code, the following groups of offenders can be sentenced to detention in the new institution:

(1) *Security Prisoners* (Sect. 39), i.e. chiefly persons who have committed crimes in a state of unconsciousness owing to intoxication, or in a state of temporarily reduced consciousness, or who suffer from under-developed or chronically enfeebled psychic abilities. If recidivism is like to occur, owing to the particular psychic state of the offender, the court can pass a sentence of preventive detention. (Besides detention there is a wide range of other measures of security.)

(2) *Detention Prisoners* (Sect. 39*a*). This section refers especially to persistent recidivists who do not come under the first category. When they are tried for an offence they can be sentenced to detention if likely to commit new offences.

The offender has, of course, the usual right of appeal in both categories. In neither of them is the sentence indeterminate. The court shall fix a limit for the detention, but it is the explicit intention of the Act that the period shall be as long as necessary for treatment. The period can be extended by order of the court.

(3) In addition to these categories, of which the first one is supposed to contribute by far the largest number, the institution is also intended for psychopathic prisoners. They will have to serve their ordinary prison sentence in the detention centre. The question of preventive detention can be decided by the court afterwards, and the prisoner thus be subject to further detention.

The lack of an institution for psychopathic and persistent offenders has been felt heavily in Norway, and there is general agreement that the above mentioned groups can never be given adequate treatment in an ordinary prison and are very often a serious nuisance in such a prison. The new institution is therefore warmly welcomed by all who are interested in the treatment of crime.

The Governor and the principal Psychiatrist have already been appointed.

ASLEJÖRN KAASEN,
Advocate, Harstad, Norway
(at present London School of Economics).

THE CONFERENCE ON THE SCIENTIFIC STUDY OF JUVENILE DELINQUENCY

The Conference on the Scientific Study of Juvenile Delinquency, convened by the British Psychological Society, the Howard League for Penal Reform, the Institute for the Study and Treatment of Delinquency, the Institute of Sociology, the National Association for Mental Health, the Royal Medico-Psychological Association, and held at the Royal Institution, London, on October 1, 1949, was generally considered one of the most important recent events in the field of Criminology in Great Britain. The Report of its Proceedings, published by the National Association for Mental Health under the title 'Why Delinquency?', has proved to be of considerable value to the various local Committees and to individual students engaged in research on juvenile delinquency. It is to be welcomed, therefore, that the Chairman of the Convening Committee of the Conference, Dr. A. Torrie, Medical Director of the National Association, has recently taken steps to form a Working Party, mainly composed of representatives of the convening bodies, to discuss the next steps which might be taken to prepare the ground for further research. The Working Party has so far held monthly meetings since its formation in October, 1950.

H. M.

A NOTE ON ATTENDANCE CENTRES

The Criminal Justice Bill of 1947 omitted the provisions relating to Attendance Centres which had been included in the original Bill of 1938. During the passage of the new Bill through the House of Lords a clause was included which provided for the setting-up of these centres for offences between the ages of twelve and twenty-one but the Rules made under Section 52 of the Act apply to the twelve to seventeen age-group. The most important difference between the 1938 Bill and the 1948 Act relates to the length of time for which boys may be sent to the centre; the original maximum of sixty hours was reduced to one of twelve, a serious

reduction if the treatment given to the boys at the centres is to be regarded in any way as reformative. Since the original purpose of Parliament was that the purpose should be punitive, a reduction in the length of the maximum is not necessarily a disadvantage.

The Rules made under the Act remain vague as to the intention of the centres. 'The occupation and instruction given at a centre shall be such as to occupy the boys during the period of attendance in a manner conducive to health of mind and body'.[2] Opinion has been sharply divided as to the function of the centres and it has been argued that this intention of Parliament that they should be punitive rather than reformative is in fact impossible to carry out. By way of experiment three centres were set up at Hull, Smethwick, and at Peel House in London. Such lessons as have been already learned in the very short history of the centres come from Peel House of which a part was opened as a centre in July, 1950.

It rapidly became clear that the idea of a purely punitive centre would be unworkable even in the most unlikely event of finding police officers who would be prepared to act as staff. The present system has operated on the basis of a combination of reformative and punitive treatment, and the three hours between 2 o'clock and 5 o'clock on Saturday afternoons at Peel House have been sub-divided into an hour devoted to an activity of a punitive nature, such as scrubbing and cleaning, and the remainder of the time in a more constructive activity such as basket-making. The small number of boys sent to the Attendance Centre during the early months made it impossible to carry out an activity such as physical training which had been regarded as a valuable way in which time might be spent. Tuition in cycle maintenance and repair has also been planned. It has been suggested that six periods of two hours each are likely to be of greater value than four periods of three hours.

Although it is still too early to pass any firm judgment on the success or failure of the centre, and indeed it would be rash to do so without a good deal more experience, there are, nevertheless, a number of quite definite points which can be made. Of these, the first, and most important, is the vital need for classification and of careful selection of the boys for the centre. Magistrates are not altogether clear as to the type of boy who should be treated in this way, though the suggestion has been made that the mischievous boy who has failed to take his period of probation seriously is the kind of boy who might respond to treatment of this kind. It is easier, perhaps, to draw attention to the kind of boy who should not be sent. Boys who are emotionally unstable or who have failed to respond to such institutional methods of training as Approved Schools, or members of a gang which has been working together, present an unsuitable choice.

Secondly, there is the need for some classification according to age, a fact which has already been recognized at Peel House. The attitude of the twelve to fifteen group towards the activities in which they are engaged while at the centre is different from that of the older group between sixteen and seventeen. It may well be that the school-leaving age marks the boundary between the two groups, and that activities such as scrubbing which are regarded as unpleasant to the boys out at work, are thought to be quite agreeable by the younger group while still at school. In any case, experience in the youth club field shows the need for a possible division at fifteen plus.

[2] Rule 2 (1).

Thirdly, there is the value to be gained from the passing of adequate information on the boy to the officer in charge of the centre. In the case of boys who have already been placed on probation this seems an unnecessary observation to make. It is taken for granted by the probation officer. In the case of other boys, however, it is a point to be borne in mind by the Juvenile Court at the time when the attendance order is being made. Nor is this passage of information a one-way process. It has already become clear that the officer in charge has learned enough about many of the boys sent to the centre to be of value to the probation officer in his future treatment.

Lastly, the importance of good co-operation between the officer in charge of the centre and workers in the many different branches of the Youth Service and also of Further Education must be stressed. Some of the more interesting activities which could be done at the centre might well lead a number of boys on to membership of a youth club or other organization. If the boys sent to the centre are selected from the mischievous rather than the delinquent, this is by no means a Utopian belief, and a constructive piece of work will have been achieved.

Our conclusion, however, in spite of the good work which is being done by the police at Peel House and the inadequate experience on which our opinion is based, is not altogether an optimistic one. It arises from the inherent difficulty involved in any part of the penal ststem in which there is a pronounced conflict of objective. It is by no means certain that a compromise between the punitive and the reformative elements can reasonably be expected to operate satisfactorily, and it remains to be proved whether the Attendance Centre can be made sufficiently unpleasant to prove an adequate punishment and an effective deterrent, and at the same time to introduce boys to some of the more constructive occupations which it is the purpose of the Youth Service to develop.

JOHN SPENCER.

CORRESPONDENCE

To the Editorial Board

Sirs,—Your remarks upon the possible use of Corrective Training as an indeterminate sentence, on page 82 of the October issue, underline a query which has been in my mind for some time. Was the intention of Section 21 (1) and (3) and the Third Schedule of the Criminal Justice Act, 1948, that Corrective Training should eventually be an indeterminate sentence, or was it not? Or was it an experiment without any defined intention in this respect?

As you are aware, the rule now is that the normal two-thirds remission applies as in ordinary prison sentences. I have so far asked the Assistant Governor of a Closed Corrective Training Prison, an Assistant Commissioner who I believe is specially responsible for Corrective Training, and the Governor of an open prison which takes Corrective Trainees, why the two-thirds rule applies. The first two said that it was in the Act, and the third said cautiously that he did not think that the law would countenance the application of limited indeterminacy in these cases. Perhaps it is in the Act, but I have not been able to find it. The operative paragraph seems to be paragraph 1 of the Third Schedule, which reads:

> 'The Prison Commissioners may release on licence a person sentenced to corrective training or preventive detention after he has served such portion of his sentence as may be determined in accordance with rules made under Section 52 of this Act: Providing that the Secretary of State may require the Prison Commissioners to release a person so sentenced at any time.'

The two-thirds rule would therefore appear to be a Rule and not part of the Act. It is true enough that there is not a great deal of likelihood of there being separate

Corrective Training Institutions in the near future, but the point is by no means academic. Experience in Borstals seems to me to have demonstrated that the principle of limited indeterminacy is inseparable from the whole concept of training, if ' training ' is taken to mean something more than trade courses and evening educational activities. That the influence of Borstal has spread upwards through the whole system—it is no accident that the Governors of Maidstone, Reading and Sudbury Prisons are ex-Borstal Governors—is apparent enough, and while Borstal methods certainly need modification when applied to adults, there seems to be no reason why the principle of earning one's release should not be tried, and why indeterminacy should not be accepted as an ultimate aim of the Corrective Training system.

There is a second and severely practical point also involved. Opinion amongst Borstal Governors and Housemasters had, during the last years before the war, been coming to the conclusion that there was a saturation point in the period of sentence after which a boy was almost certain to deteriorate. This seemed to average out at about two years in the closed institutions and somewhat less in the open. It seems very likely that a similar saturation point would obtain for adult offenders also, but so long as the two-thirds rule is operating it is impossible to find it. If, in fact, the optimum period is shorter than the average length of sentence, which was found to be the case in Borstal, then public money is being wasted in keeping offenders longer than necessary; if it is longer, then public money is being wasted by misapplication. In any case, the eventual aim should be to free the system to find its own level.

One general point may be appended. The application of limited indeterminacy generally implies some kind of stage system, and it is advisable from the outset to remove the impression that the progressive stage system as applied in the prison system is the same thing as the progressive stage system applicable to a training régime where the accent is on the reformatory principle. A prison stage system is primarily a relaxation of the severity of punishment earned by good conduct and industry; but not so a training system, for in a training system which is working well there is very little to be relaxed. In a training system the progressive stages merely mark general progress in fitness for release, and it is indicative that the Llewellin Borstals—Lowdham Grange, North Sea Camp, Usk and Hewell Grange—which to my mind are our nearest approach to a real training system, have all dispensed with the earlier complications of the progressive stage system in Borstals, and have reduced it to a Beginners' Grade, which is a settling down grade; a Training Grade, in which most of the period is spent; and a Leavers' Grade which merely means those eligible for discharge; and there is a progressive reduction in the differences in privileges extended towards the different grades.

Work with adults is necessarily more difficult since there is much less pliability in the material one is working with, and I do not pretend that the success figures of Corrective Training are ever likely to be high—and indeed the first flood of committals is a job lot in which the success rate will probably not be very encouraging, especially if the Home Secretary persists in keeping trainable perpetrators of crimes of violence out of the open prisons. Nevertheless, I am convinced that indeterminacy must be the eventual aim of the system, since it is only upon indeterminacy that the experimentation which leads to the discovery of improved training methods can be based.

Yours, etc.,

A. G. Rose.

University of Oxford Delegacy for Social Training,
November 10, 1950.

To the Editorial Board

Sirs,—May I raise one or two points on Dr. Glover's critical notice of ' Delinquency and Human Nature ' ? Having carefully studied both the book and the notice I am left with the feeling that the reviewer has to some extent missed the point of Dr. Stott's work.

Dr. Glover's great value to theoretical psychiatry is his unflinching and lucid application of the orthodox Freudian interpretation of human dynamics. So far so good. But he apparently regards the Freudian interpretation of human dynamics as beyond question. For instance, in criticism of Dr. Stott's interpretations, he refers to the ' actual nature ' of tics. By which he means, presumably, the explanation of tics from the Freudian point of view. This obviously creates a difficulty, for, if a reviewer regards the

findings of one particular school of thought as wholly right, it follows that he will regard any alternative thesis as misguided and irritating—the review bears some marks of irritation, including two mis-spellings in the quotations cited from ' Delinquency and Human Nature '.

As I see it, Dr. Stott, aware of the alternative interpretations of both neurosis and crime, held with an almost fanatical tenacity by different schools of depth psychologists, set himself the task of applying Occam's Razor as vigorously as possible. He may have been a little over-zealous in his shaving down of existing theory, but his attempt at a description of delinquent behaviour in terms of the dynamic life-field instead of the dynamic unconscious is surely not to be condemned on that account. Indeed, is not such an approach to be regarded as a welcome counterpoise to the current absorption with the individual unconscious in the description of delinquent behaviour?

Yours, etc.,
JAMES HEMMING.

Isleworth.
November 1950.

Dr. Glover writes: Although I am very ready to argue, at any appropriate time and place, that the investigator who embarks on a deep research into psycho-pathological states without taking unconscious factors into account is destined to arrive at superficial conclusions, that was not the burden of my critical notice of Dr. Stott's ' Delinquency and Human Nature '.

Dr. Stott confessedly set out to fill a ' gap ' in our understanding of delinquent states. But, instead of paying attention to the gap and narrowing it as far as possible by making use of established psychiatric information, he deliberately chose to handicap himself by adopting a scientifically ' naïve ' method of investigation which might once on a time have been appropriate to a descriptive study of ' human nature ' but could scarcely be expected to fill any existing gaps in our knowledge of delinquency. Inevitably he ended by re-discovering what descriptive psychologists have known for already almost twenty years; what, indeed, Dr. Stott himself knew before he started. This, to my mind, is a prodigal waste of Dr. Stott's unquestioned talents.

Mr. Hemming's point about tics is perhaps a small matter, and I am quite prepared to express my criticism in a more acceptable manner, to say in fact that Dr. Stott's explanation of tics in terms of a ' dynamic life-field ' is no doubt eminently satisfying to those normal psychologists who limit their techniques to the descriptive forms of observational interview but can scarcely be expected to satisfy any clinical observer. And incidentally I am glad to note that, by his interpretation of the misprints in my quotations, Mr. Hemming ranges himself on the side of the dynamic unconscious. According to descriptive psychology, these were of course merely misprints.

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' Acute Neurotic Breakdown in Children with Refusal to go to School ', *Archives of Disease in Childhood*, 1948, **23**, 266.

' Abnormal Behaviour and Mental Breakdown in Adolescence ', *Journal of Mental Science*, 1949, **95**, 589.

' Reactive Psychosis in Adolescence ', *Journal of Mental Science*, 1950, **96**, 448 (jointly).

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